| Fill in this information to identify y | our case: | | | d 12/12/23 1 | 4:31:20 | Desc M | l ain |
|---|---|---|----------------|--------------------------|---------------------------------|-----------------|---------------------------------------|
| United States Bankruptcy Court for the | | ımenı P | age I of ! | 52 | | | |
| District of New Jersey | | | | | | | |
| Case number (If known): | ☐ Ch ☑ Ch ☐ Ch | ter you are filing apter 7 apter 11 apter 12 apter 13 | g under: | | | | Check if this is ar amended filing |
| Official Form 201 Voluntary Petitio If more space is needed, attach a sep number (if known). For more information | arate sheet to this for | m. On the top o | of any additio | nal pages, write | the debtor's | name and th | |
| 1. Debtor's name | Artex Inc. | | | | | | |
| All other names debtor used in the last 8 years | | | | | | | |
| Include any assumed names, trade names, and doing business as names | | | | | | | |
| 3. Debtor's federal Employer Identification Number (EIN) | 22-3818576 | | | | | | |
| 4. Debtor's address | Principal place of bu | | | Mailing ad of busines | | erent from p | rincipal place |
| | 31 Currie Avenue | | | Numbor | Stroot | | |
| | Number Street | | | Number | Street | | |
| | Wallington | NJ | 07057 | P.O. Box | | | |
| | City | State | ZIP Code | City | | State | ZIP Code |
| | Bergen County | | | | of principal a place of busi | | erent from |
| | County | | | Number | Street | | |
| | | | | City | | State | ZIP Code |
| 5. Debtor's website (URL) | | | | | | | |
| 6. Type of debtor | ☑ Corporation (include ☐ Partnership (exclude ☐ Other. Specify: | ding LLP) | bility Compan | y (LLC) and Limite | ed Liability Pa | ırtnership (LLI | P)) |

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| De | btor | Artex Inc. | | Case number (if known) |
|--|---------------------------------|---|---|--|
| | | Name | | |
| 7. | Describ | e debtor's business | Single A Railroad Stockbr Commo Clearing None of B. Check a Tax-exe Investm § 80a-3 | Care Business (as defined in 11 U.S.C. § 101(27A)) Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) If (as defined in 11 U.S.C. § 101(44)) Ooker (as defined in 11 U.S.C. § 101(53A)) Indity Broker (as defined in 11 U.S.C. § 101(6)) If Bank (as defined in 11 U.S.C. § 781(3)) If the above If that apply: If the permit entity (as described in 26 U.S.C. § 501) Interest company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. |
| | | | 23833 | 0 |
| 8. Under which chapter of the Bankruptcy Code is the debtor filing? Check one: Chapter 7 Chapter 9 Chapter 11. Check all that apply: The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D), and aggregate noncontingent liquidated debts (excluding debts owed to insiders or at are less than \$3,024,725. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B). The debtor is a debtor as defined in 11 U.S.C. § 1182(1), its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$7,500,000, and it chooses to proceed under Subchapter V of Chapter 11. If this sub-box is selected, attach the most recent balance sheet, statement of operations is a debtor as defined in 11 U.S.C. § 1118(1)(B). The debtor is a debtor as defined in 11 U.S.C. § 1182(1), its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$7,500,000, and it chooses to proceed under Subchapter V of Chapter 11. If this sub-box is selected, attach the most recent balance sheet, state of operations, cash-flow statement, and federal income tax return, or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B). A plan is being filed with this petition. Acceptances of the plan were solicited prepetition from one or more classes of crin accordance with 11 U.S.C. § 1126(b). The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934, File the Attachment to Voluntary Petition for Non-Individu for Bankruptcy under Chapter 11 (Official Form 201A) with this form. The debtor is a shell company as defined in the Securities Exchange Act of 1934. | | | | |
| | | | ☐ Chapte | 1 12 |
| 9. | filed by within t | rior bankruptcy cases or against the debtor he last 8 years? nan 2 cases, attach a list. | | When |
| 10. | pending busines affiliate | bankruptcy cases g or being filed by a ss partner or an of the debtor? sess. If more than 1, separate list. | D | Relationship |
| | attaon a | oparate not. | | · |

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| Debto | or | Artex Inc. | | Case number (if known)_ | | | | | | |
|---------|----------|--|---|---|--|--|--|--|--|--|
| | | Name | | | | | | | | |
| | | the case filed in <i>this</i> | Check all that apply: | | | | | | | |
| c | district | ? | Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district. | | | | | | | |
| | | | ☐ A bankruptcy case concerr | ning debtor's affiliate, general partner, or | partnership is pending in this district. | | | | | |
| | | | | | | | | | | |
| р | ossess | e debtor own or have sion of any real y or personal property | ✓ No Yes. Answer below for each | h property that needs immediate attentio | n. Attach additional sheets if needed. | | | | | |
| that ne | | eds immediate | Why does the prope | rty need immediate attention? (Check a | all that apply.) | | | | | |
| а | ttentio | 11 f | · | | ntifiable hazard to public health or safety. | | | | | |
| | | | | d? | | | | | | |
| | | | _ | sically secured or protected from the wea | | | | | | |
| | | | | able goods or assets that could quickly de mple, livestock, seasonal goods, meat, de ptions). | | | | | | |
| | | | Other | | | | | | | |
| | | | | | | | | | | |
| | | | Where is the proper | ty? | | | | | | |
| | | | | Number Street | | | | | | |
| | | | | | | | | | | |
| | | | | City | State ZIP Code | | | | | |
| | | | Is the property insur | red? | | | | | | |
| | | | □ No | | | | | | | |
| | | | ☐ Yes. Insurance age | ncy | | | | | | |
| | | | Contact name | | | | | | | |
| | | | Phone | | | | | | | |
| | | | | | | | | | | |
| | S | tatistical and adminis | trative information | | | | | | | |
| 13 F |)ebtor' | s estimation of | Check one: | | | | | | | |
| | | e funds | | distribution to unsecured creditors. | | | | | | |
| | | | ☐ After any administrative ex | penses are paid, no funds will be availab | ole for distribution to unsecured creditors. | | | | | |
| 44 5 | otim of | ed number of | ☑ 1-49 | 1,000-5,000 | 25,001-50,000 | | | | | |
| | reditor | | □ 50-99 □ 100-199 | □ 5,001-10,000 □ 10,001-25,000 | ☐ 50,001-100,000 ☐ More than 100,000 | | | | | |
| | | | 200-999 | 10,001-25,000 | Wore than 100,000 | | | | | |
| 1F E | etimat | ed assets | \$0-\$50,000 | \$1,000,001-\$10 million | \$500,000,001-\$1 billion | | | | | |
| 15. E | -sumdl | cu doocio | □ \$50,001-\$100,000 □ \$100,001-\$500,000 | □ \$10,000,001-\$50 million □ \$50,000,001-\$100 million | □ \$1,000,000,001-\$10 billion □ \$10,000,000,001-\$50 billion | | | | | |
| | | | □ \$500,001-\$1 million | \$100,000,001-\$500 million | ☐ More than \$50 billion | | | | | |

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| Debtor | Artex Inc. | | Case number (if knd | Case number (# known) | | | | | |
|--------------|---|---|---|---|--|--|--|--|--|
| | Name | | | | | | | | |
| 16. Estimato | ed liabilities | □ \$0-\$50,000 □ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million | □ \$1,000,001-\$10 million □ \$10,000,001-\$50 million □ \$50,000,001-\$100 million □ \$100,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion | | | | | |
| R | equest for Relief, Dec | laration, and Signatures | | | | | | | |
| WARNING | | | tement in connection with a bankruptcy 8 U.S.C. §§ 152, 1341, 1519, and 357 | | | | | | |
| | ion and signature of ed representative of | The debtor requests relie petition. | of in accordance with the chapter of title | e 11, United States Code, specified in this | | | | | |
| | | I have been authorized to | o file this petition on behalf of the debto | or. | | | | | |
| | | I have examined the info | rmation in this petition and have a reas | sonable belief that the information is true and | | | | | |
| | | I declare under penalty of pe | rjury that the foregoing is true and corr | ect. | | | | | |
| | | Executed on 12/11/202 | <u>23</u> | | | | | | |
| | | ✗ /s/ Adam Oldakov | vski Adan | n Oldakowski | | | | | |
| | | Signature of authorized repre | | ame | | | | | |
| | | Title President | | | | | | | |
| 18 Signatu | re of attorney | ★ /s/ David Stevens | | 12/11/2023 | | | | | |
| | , o o. ao, | Signature of attorney for deb | | MM / DD / YYYY | | | | | |
| | | | | | | | | | |
| | | David Stevens | | | | | | | |
| | | Printed name Scura Wigfield, He | eyer, Stevens & Cammarota | a LLP | | | | | |
| | | Firm name 1599 Hamburg Tu | | | | | | | |
| | | Number Street | | | | | | | |
| | | Wayne City | Nu State | | | | | | |
| | | 973-696-8391 | | stevens@scura.com | | | | | |
| | | Contact phone | | il address | | | | | |
| | | 034422007 | Nu | I | | | | | |
| | | Bar number | State | | | | | | |
| | | | | | | | | | |

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Adam Oldakowski 31 Curie Avenue Wallington, NJ 07057

American Express 20500 Belshaw Avenue Carson, CA 90746

Horizon BCBS of NJ P.O. BOX 10130 Newark, NJ 07101

JPMorgan Chase Bank PO Box 33035 Louisville, KY 40232

Just A Floor 94 Miller Street Wallington, NJ 07057

Promix Group INC 1 Orient Way STE F# 333 Rutherford, NJ 07070

Promix LLC 94 Miller Street Wallington, NJ 07057

SASE Company, LLC. 2475 Stock Creek Blvd Rockford, TN 37853

Spencer Savings Bank 611 River Drive Elmwood Park, NJ 07407

The Hartford 1 Hartford Plaza Hartford, CT 06115

U.S Small Business Administration 2 North Street, Suite 320 Birmingham, AL 35203 Verizon Wireless PO Box 489 Newark, NJ 07101

Wells Fargo Bank PO Box 51174 Los Angeles, CA 90051

United States Bankruptcy Court District of New Jersey

| In re: | Artex Inc. | | Case No. | |
|--------|------------|-----------|----------|----|
| | | Debtor(s) | Chapter | 11 |

Verification of Creditor Matrix

The above-named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of their knowledge.

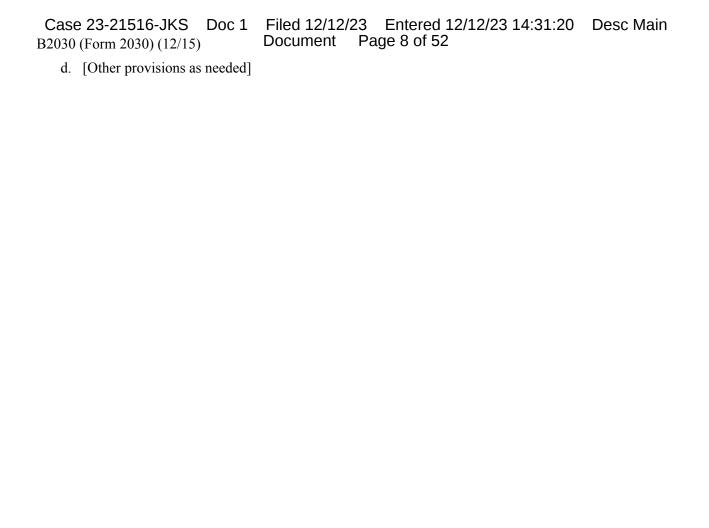
| Date: | 12/11/2023 | /s/ Adam Oldakowski |
|-------|------------|---|
| | | Signature of Individual signing on behalf of debtor |
| | | President |
| | | Position or relationship to debtor |

B2050 (Form 2015) (67) (58) Doc 1 Filed 12/12/23 Entered 12/12/23 14:31:20 Desc Main Document Page 7 of 52

United States Bankruptcy Court

| | District of New Jersey | |
|----------|---|--|
| Ir | In re Artex Inc. | |
| | | Case No |
| De | Debtor | Chapter_ ¹¹ |
| | DISCLOSURE OF COMPENSATION OF ATTORNEY FO | OR DEBTOR |
| 1. | 1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I above named debtor(s) and that compensation paid to me within one year petition in bankruptcy, or agreed to be paid to me, for services rendered or the debtor(s) in contemplation of or in connection with the bankruptcy cas | before the filing of the to be rendered on behalf of |
| <u>F</u> | FLAT FEE | |
| | For legal services, I have agreed to accept | \$ |
| | Prior to the filing of this statement I have received | \$ |
| | Balance Due | \$ |
| ✓ R | RETAINER | |
| | For legal services, I have agreed to accept a retainer of | \$ |
| | The undersigned shall bill against the retainer at an hourly rate of [Or attach firm hourly rate schedule.] Debtor(s) have agreed to pay all Cou approved fees and expenses exceeding the amount of the retainer. | \$ 150.00 - 525.00 |
| 2. | . The source of the compensation paid to me was: | |
| | Debtor Other (specify) | |
| 3. | 1 1 | |
| | Debtor Other (specify) | |
| 4. | I have not agreed to share the above-disclosed compensation with an are members and associates of my law firm. | y other person unless they |
| | I have agreed to share the above-disclosed compensation with a other not members or associates of my law firm. A copy of the Agreement, together the people sharing the compensation is attached. | • |
| 5. | . In return of the above-disclosed fee. I have agreed to render legal service for | or all aspects of the |

- 5. In return of the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
 - a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
 - b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
 - c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;



6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

| 1 | \cap | FI | R | 7 | Γ | n | F٦ | ī | CA | \ | Γ | ľ | \cap | ١ | N | ſ |
|---|--------|------|---|-----|----------|---|-----|---|----------|----|----------|---|--------|---|---|---|
| ١ | | г. і | Г | . 1 | | | г 1 | | <i>F</i> | ٠. | | ш | ١. | , | • | |

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

Scura Wigfield, Heyer, Stevens & Cammarota LLP

Name of law firm 1599 Hamburg Turnpike Wayne, NJ 07470

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Form 1120-S

U.S. Income Tax Return for an S Corporation

Do not file this form unless the corporation has filed or is attaching Form 2553 to elect to be an S corporation.

| OMB No. 1545- | 0123 |
|---------------|------|
| <u> </u> | _ |

Department of the Treasury **2022** Go to www.irs.gov/Form1120S for instructions and the latest information. Internal Revenue Service For calendar year 2022 or tax year beginning 2022, ending 20 A S election effective date D Employer identification number 07/26/2001 ARTEX INC 22-3818576 **TYPE** B Business activity code Number, street, and room or suite no. If a P.O. box, see instructions. E Date Incorporated OR number (see instructions) 31 CURRIE AVE PRINT 07/26/2001 238300 City or town, state or province, country, and ZIP or foreign postal code F Total assets (see instructions) Wallington C Check if Sch. M-3 attached 497.014 Is the corporation electing to be an S corporation beginning with this tax year? See instructions.

Yes
No Check if: (1) Final return (2) Name change (3) Address change (4) Amended return (5) Selection termination Check if corporation: (1) Aggregated activities for section 465 at-risk purposes (2) Grouped activities for section 469 passive activity purposes Caution: Include only trade or business income and expenses on lines 1a through 21. See the instructions for more information. Gross receipts or sales Returns and allowances . . Balance. Subtract line 1b from line 1a . C 1c Income 1,211,427 Cost of goods sold (attach Form 1125-A) 2 2 310.005 Gross profit. Subtract line 2 from line 1c 3 3 901.422 Net gain (loss) from Form 4797, line 17 (attach Form 4797) 4 4 0 5 Other Income (loss) (see instructions - attach statement) 5 0 6 Total income (loss). Add lines 3 through 5 6 901,422 7 Compensation of officers (see instructions—attach Form 1125-E) limitations) 7 74,600 8 Salarles and wages (less employment credits) 8 401,634 9 Repairs and maintenance 9 35,787 10 10 ភ្ន 11 11 116,799 instructions 12 Taxes and licenses . . . 12 51,331 13 Interest (see instructions) . 13 14.717 Depreciation from Form 4562 not claimed on Form 1125-A or elsewhere on return (attach Form 4562) 14 14 0 Depletion (Do not deduct oil and gas depletion.) 15 ees) 15 16 16 3.950 Deductions 17 Pension, profit-sharing, etc., plans 17 Employee benefit programs 18 18 45,143 19 Other deductions (attach statement) 19 155,683 20 Total deductions. Add lines 7 through 19 20 899,644 21 Ordinary business income (loss). Subtract line 20 from line 6 21 1,778 Excess net passive income or LIFO recapture tax (see instructions) . . . 22a 22a 0 Tax from Schedule D (Form 1120-S) b 22b 0 Tax and Payments c Add lines 22a and 22b (see instructions for additional taxes) 22c 0 23a 2022 estimated tax payments and 2021 overpayment credited to 2022 . . 23a 23b 0 Credit for federal tax paid on fuels (attach Form 4136) C 23¢ 0 d 23d 0 24 Estimated tax penalty (see instructions). Check if Form 2220 is attached 0 24 Amount owed. If line 23d is smaller than the total of lines 22c and 24, enter amount owed 25 25 0 26 Overpayment. If line 23d is larger than the total of lines 22c and 24, enter amount overpaid . 26 0 27 Enter amount from line 26: Credited to 2023 estimated tax Refunded 0 Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Sign aln Here May the IRS discuss this return with the preparer shown below? Signature of officer Date Title See Instructions. Yes No Print/Type preparer's name Preparer's signature Paid Date Check 🗷 if Damian Kolnierowicz 03/15/2023 self-employed P02271992 **Preparer** DK TAX SERVICES INC Firm's name 85-3118011 Firm's EIN **Use Only** 358 MIDLAND AVE Firm's address Garfield 07026 Phone no. (973)809-2687

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| | 120-8 (2022) | | | | | Page 2 | | |
|--------|--|---|---|---------------------------------|---|---|--|--|
| Sch | edule B Other Information | (see instructions |) | · · · | | 1 290 2 | | |
| 1 | c | Other (specify) | Accrual | | | Yes No | | |
| 2 | a Business activity Specialty 7 | rade Contractors | b Product or servi | ce CONSTRUCT | ION | | | |
| 3 | At any time during the tax year, nominee or similar person? If "Yes | was any shareholde s," attach Schedule B | r of the corporation a c 3-1, Information on Certa | disregarded entity, a | a trust, an estate, or a | x | | |
| 4 | At the end of the tax year, did the | corporation: | , | | are corporation | | | |
| а | Own directly 20% or more, or ow foreign or domestic corporation? below | For rules of construct | ctive ownership, see ins [,] | tructions. If "Yes." / | complete (i) through (v) | × | | |
| | (i) Name of Corporation | (ii) Employer Identification Number (if any) | (iii) Country of Incorporation | (iv) Percentage of | (v) If Percentage in (iv) Is 10 Date (if applicable) a Qualifie S Subsidiary Election V | d Subchapter | | |
| | | | | | | | | |
| | | | | | | | | |
| b | Own directly an interest of 20% of capital in any foreign or domestic trust? For rules of constructive own | partnership (including | an entity treated as a n | artnership) or in the | hanafialal interest of a | × | | |
| | (i) Name of Entity | (ii) Employer Identification Number (if any) | (iii) Type of Entity | (iv) Country of Organization | (v) Maximum Percei in Profit, Loss, c | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| 5a | At the end of the tax year, did the If "Yes," complete lines (i) and (ii) ii Total shares of restricted sto (ii) Total shares of non-restricte | pelow. ock | | | | × | | |
| b | (ii) Total shares of non-restricte At the end of the tax year, did the If "Yes," complete lines (i) and (ii) it (i) Total shares of stock outstar (ii) Total shares of stock outstar | corporation have any below. nding at the end of the | e tax year | ons, warrants, or sin | nilar instruments? . | × | | |
| 6 | Has this corporation filed, or is | it required to file. | Form 8918. Material A | dvisor Disclosure | Statement, to provide | | | |
| 7 | information on any reportable tran Check this box if the corporation is | saction? , , . ssued publicly offered | debt instruments with | original issue disco- | | × | | |
| | If checked, the corporation may handle instruments. | ave to file Form 828 | 11, Information Return fo | or Publicly Offered (| Original Issue Discount | | | |
| 8 | If the corporation (a) was a C corporation before it elected to be an S corporation or the corporation acquired an asset with a basis determined by reference to the basis of the asset (or the basis of any other property) in the hands of a C corporation, and (b) has net unrealized built-in gain in excess of the net recognized built-in gain from prior years, enter the net unrealized built-in gain reduced by net recognized built-in gain from prior years. See instructions | | | | | | | |
| 9 | Did the corporation have an electi in effect during the tax year? See i | on under section 163 | (i) for any real property t | trade or business o | r any farming business | | | |
| 10 | Does the corporation satisfy one o | r more of the followin | g? See instructions | | | × | | |
| a b | The corporation owns a pass-through the corporation's aggregate averaged preceding the current tax year are | rage annual gross r | eceipts (determined un | ider section 448(c) |) for the 3 tay years | | | |
| c | The corporation is a tax shelter and if "Yes," complete and attach Forr | d the corporation has | business interest expen | ise. | | | | |
| 11 | Does the corporation satisfy both | of the following condi | itions? | | ua(j). | × | | |
| а | The corporation's total receipts (se | e instructions) for the | tax year were less than | \$250,000. | | ^ | | |
| b | The corporation's total assets at the | e end of the tax year | were less than \$250,000 | 0. | | | | |
| | If "Yes," the corporation is not requ | uired to complete Sch | nedules L and M-1. | | | 10 No. | | |

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| | 20-8 (202: | | Page 3 |
|---|------------|--|--------------------|
| Sche | dule B | (0011111110110) | Yes No |
| 12 | During | the tax year, did the corporation have any non-shareholder debt that was canceled, was forgiven, or had the | |
| | terms n | nodified so as to reduce the principal amount of the debt? | X |
| | if "Yes, | enter the amount of principal reduction | |
| 13 | During 1 | ne tax year, was a qualified subchapter S subsidiary election terminated or revoked? If "Yes," see instructions | × |
| 14a | Did the | corporation make any payments in 2022 that would require it to file Form(s) 1099? | x |
| b | If "Yes," | did or will the corporation file required Form(s) 10997. | x |
| 15 | Is the co | orporation attaching Form 8996 to certify as a Qualified Opportunity Fund? | Х |
| C - Imm | It "Yes," | enter the amount from Form 8996, line 15 | |
| Scne | aule K | Shareholders' Pro Rata Share Items Total an | nount |
| | 1 | Ordinary business income (loss) (page 1, line 21) | 1,778 |
| | 2 | Net rental real estate income (loss) (attach Form 8825) | 0 |
| | 3a | Other gross rental income (loss) | |
| | þ | Expenses from other rental activities (attach statement) 3b 0 | |
| _ | C | Other net rental income (loss). Subtract line 3b from line 3a | 0 |
| SS | 4 | Interest income | |
| Ĩ | 5 | Dividends: a Ordinary dividends | |
| Ĕ | | b Qualified dividends | |
| Income (Loss) | 6 | Royalties | |
| _ | 7 | Net short-term capital gain (loss) (attach Schedule D (Form 1120-S)) | 0 |
| | 8a | Net long-term capital gain (loss) (attach Schedule D (Form 1120-S)) | 0 |
| | b | Collectibles (28%) gain (loss) | |
| | 9 | Unrecaptured section 1250 gain (attach statement) | |
| | 10 | Net section 1231 gain (loss) (attach Form 4797) | 0 |
| | 11 | Other income (loss) (see instructions) Type: | 0 |
| Deductions | 12a | Section 179 deduction (attach Form 4562) | 0 |
| | b | | 0 |
| ğ | 6 | Investment Interest expense | |
| ۵ | l d | Section 59(e)(2) expenditures Type: 12c Other deductions (see instructions) Type: 12d | |
| | 13a | | 0 |
| | b | Law because bound 1916 at 1 | |
| Ø | , c | Ouglified rehabilitation consequences (to the consequence) | 0 |
| Credits | d | Other rental real estate credits (see instructions). Type: | 0 |
| ວັ | e | Other rental real estate credits (see instructions) Type: Other rental credits (see instructions) Type: District and the content of t | |
| | f | Other rental credits (see instructions) Type: 13e Biofuel producer credit (attach Form 6478) | |
| | g | Other gradite (age instructions) | 0_ |
| 고區 | <u> </u> | Other credits (see instructions) Type: | 0 |
| Inter | 14 | Attach Schedule K-2 (Form 1120-S), Shareholders' Pro Rata Share Items—International, and | Research Co. |
| <u> </u> | 1 | check this box to indicate you are reporting items of international tax relevance | |
| | 15a | Post-1986 depreciation adjustment | 18 - K 1.0 W W |
| a Za | ь | Adjusted gain or loss | 0 |
| iati m | C | Depletion (other than oil and gas) | |
| Alternative Minimum Tax (AMT) Items | ` d | Oil, gas, and geothermal properties—gross income . | |
| Āã₹ | . е | Oil, gas, and geothermal properties—deductions | |
| | f | Other AMT items (attach statement) | 0 |
| B. G | 16a | Tax-exempt interest income | |
| : <u>₩</u> 88 | b | Other tax-exempt income | |
| Items Affecting Shareholder Basis | С | Nondeductible expenses | 0 |
| S A | d | Distributions (attach statement if required) (see instructions) | |
| ten are | е | Repayment of loans from shareholders | |
| <u>გ</u> | f | Foreign taxes paid or accrued | |

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| Form 11 | 20-S (2022) | | | | Page 4 |
|----------------------|--|---------------------------------------|---|--|--|
| Sche | dule K Shareholders' Pro Rata Share Item | s (continued) | | · · · · · · | Total amount |
| | 17a Investment income | | | 17a | |
| Other Information | b Investment expenses , | | | 17b | |
| ᅎౖౖ | c Dividend distributions paid from accumul | ated earnings and pro | ofits , . | 17c | |
| | | ent) | | | 1 100 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| Recon- ciliation | | the amounts on lire | nes 1 through 10 in nes 11 through 12d a | the far right and 16f . 18 | 1,778 |
| Sche | dule L Balance Sheets per Books | Beginning | of tax year | End of | tax year |
| | Assets | (a) | (b) | (c) | (d) |
| 1 | Cash | Sca. 1. 18 Si. 1. 1. 1. | 266,600 | | 133,844 |
| 2a | Trade notes and accounts receivable | 38,464 | | | 1.37.7.18.7.18.7.18.7.1 |
| b | Less allowance for bad debts | (| 38,464 | () | 0 |
| 3 | Inventories | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | 105,134 | | 229,620 |
| 4 | U.S. government obligations | | | A CONTRACTOR | |
| 5 | Tax-exempt securities (see instructions) | 建 (1975) (1975) | | A NORTH ACCOUNT | |
| 6 | Other current assets (attach statement) | SVALIDATE SECTION OF THE | 0 | Park Supplies to the supplier of the | 0 |
| 7 | Loans to shareholders | | 43,550 | 2.5 | 133,550 |
| 8 | Mortgage and real estate loans | and the sale of | | | |
| 9 | Other investments (attach statement) | activity outsides | 0 | | 0 |
| 10a | Buildings and other depreciable assets | 0 | | 0 | |
| b | Less accumulated depreciation | (0) | 0 | (0) | 0 |
| 11a | Depletable assets | | 强强力,将 "产力"。 | | |
| b | Less accumulated depletion | () | 0 | () | 0 |
| 12 | Land (net of any amortization) | | 0 | | 0 |
| 13a | Intangible assets (amortizable only) | 0 | | 0 | |
| b | Less accumulated amortization | (0) | 0 | (0) | 0 |
| 14 | Other assets (attach statement) | | 0 | | 0 |
| 15 | Total assets | 2.00 | 453,748 | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | 497,014 |
| | Liabilities and Shareholders' Equity | eracie di ettanzo a ci | | Bright State (State (Sta | |
| 16 | Accounts payable | podrže iš niekali, šta | 7,100 | | |
| 17 | Mortgages, notes, bonds payable in less than 1 year | | | | |
| 18 | Other current liabilities (attach statement) | | 0 | | 0 |
| 19 | Loans from shareholders | | | But mention by the | |
| 20 | Mortgages, notes, bonds payable in 1 year or more | | 421,149 | LK At object controls. The | 469,737 |
| 21 | Other liabilities (attach statement) | C 150 (16) Tool (15) Section (16) | 0 | | 0 |
| 22 | Capital stock | And the second | 1,000 | 1 4 1 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | 1,000 |
| 23 | Additional paid-in capital | 9 (10.00) | | | - |
| 24 | Retained earnings | | 24,499 | | 26,277 |
| 25 | Adjustments to shareholders' equity (attach statement) | 10,000 | 0 | Company of the Compan | n |
| 26 | Less cost of treasury stock | e en a company and | () | Commence of the second | () |
| 27 | Total liabilities and shareholders' equity | A CONTRACTOR CONTRACTOR | 453,748 | | 497,014 |

Form **1120-S** (2022)

| | 120-\$ (2022) | | | | | Page 5 |
|--------|--|--|--------|--|--|----------------------------------|
| Sche | Reconciliation of Income (L Note: The corporation may be re | | | | Return | |
| 1 2 | Net income (loss) per books Income included on Schedule K, lines 1, 2, 3c, 4, 5a, 6, 7, 8a, 9, and 10, not recorded on books this year (itemize) | ne included on Schedule K, lines 1, 2, 5a, 6, 7, 8a, 9, and 10, not recorded through 10 (it | | | | 0 |
| 3 a | Expenses recorded on books this year not included on Schedule K, lines 1 through 12, and 16f (itemize): Depreciation \$ | | | Deductions included lines 1 through 12, ar against book income Depreciation \$ | on Schedule K, d 16f, not charged this year (itemize): | 0 |
| b | Travel and entertainment \$ | 0 | 8 | Add lines 5 and 6 . Income (loss) (Sche | edule K, line 18). | 0 |
| 4 | Add lines 1 through 3 | 1,778 | | Subtract line 7 from I | | 1,778 |
| Sche | Analysis of Accumulated Accumu | | nd Pro | | | ınt |
| | | adjustments a | | undistributed taxable income previously taxed | earnings and profits | (d) Other adjustments account |
| 1 | Balance at beginning of tax year | | 24,499 | 0 | 0 | 0 |
| 2 | Ordinary income from page 1, line 21 | | 1,778 | | | |
| 3 | Other additions | | 0 | | 45.37 [196] 2015 (A.A.) | 0 |
| 4 | Loss from page 1, line 21 | | 0) | Particular seasons of a particular season of the particular seasons of | | 8 |
| 5 | Other reductions | | 0) | DEDENSE LANGUAGE DATE | At 1999 Page 1999 N | (0) |
| 6 7 | Combine lines 1 through 5 | | 26,277 | 0 | 0 | 0 |
| 8 | Balance at end of tax year. Subtract line 7 fr | | 26,277 | 0 | 0 | c |
| | | · | | | | Form 1120-5 (2022) |

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22-3818576

ARTEX INC

Statement - 11208 - Deductions - Line 19 - Other deductions - Meals and Entertainment

| | Deductible Amount | Total Deductible Amount |
|-------------------------------|-------------------|-------------------------|
| 100% of Meals & Entertainment | 7,995 | 7,995 |
| Total: | 7,995 | 7,995 |

Statement-1120S-Deductions-Line~19-Other~deductions-Other~than~Meals~and~Entertainment

| Other Deductions | Amount |
|--------------------------|---------|
| UTILITIES | 9,395 |
| TRAVEL | 2,284 |
| TELEPHONES | 9,495 |
| PROFESSIONAL FEES | 7,190 |
| POSTAGE & DELIVERY | 1,102 |
| INSURANCE | 44,371 |
| BANK FEES | 674 |
| OFFICE EXPENSES | 12,031 |
| AUTO EXPENSES | 28,490 |
| COMPUTER & INTERNET FEES | 5,240 |
| TOOLS AND EQUIPMENT | 18,416 |
| PARKING EXPENSE | 4,148 |
| TOLLS | 8,440 |
| SUBSCRIPTIONS | 5,807 |
| Total: | 157,083 |

Statement - 1120S - Schedule K - Line 17D - Other items and amounts

| Description | Amount |
|------------------------------|---------|
| V - Section 199A information | 1,778 |
| W - Section 199A W-2 Wages | 476,234 |
| Total: | 478,012 |

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671121 Final_K-1 Amended K-1 OMB No. 1545-0123 Schedule K-1 Part III Shareholder's Share of Current Year Income, (Form 1120-S) Deductions, Credits, and Other Items Department of the Treasury For calendar year 2022, or tax year 13 Credits Ordinary business income (loss) Internal Revenue Service 1,778 beginning / / 2022 ending Net rental real estate income (loss) Shareholder's Share of Income, Deductions, Other net rental income (loss) Credits, etc. See separate instructions. Interest income Part I Information About the Corporation 0 Corporation's employer identification number Ordinary dividends 2 2 - 3 8 1 8 5 7 6 0 B Corporation's name, address, city, state, and ZIP code Qualified dividends Schedule K-3 is attached if ARTEX INC 0 checked Royalties 31 CURRIE AVE 6 Alternative minimum tax (AMT) items 0 Wallington NJ 07057 Net short-term capital gain (loss) C IRS Center where corporation filed return Net long-term capital gain (loss) KANSAS CITY 0 D Corporation's total number of shares 8b | Collectibles (28%) gain (loss) Beginning of tax year End of tax year Unrecaptured section 1250 gain Net section 1231 gain (loss) Part II Information About the Shareholder Items affecting shareholder basis 0 E Shareholder's Identifying number Other income (loss) -2186 F Shareholder's name, address, city, state, and ZIP code ADAM OLDAKOWSKI 105 HAYWARD PL APT 2 Wallington 07057 Other Information G Current year allocation percentage . . . 100 % Section 179 deduction See Statement H Shareholder's number of shares 0 1,778 Beginning of tax year 1000 Other deductions See Statement End of tax year 1000 476,234 I Loans from shareholder Beginning of tax year \$_ For IRS Use Only 18 More than one activity for at-risk purposes* 19 More than one activity for passive activity purposes*

* See attached statement for additional information.

0

1,778

0

0

0

0

Computation of Shareholder's Basis

INCREASES:

1. Stock basis at the beginning of the corporation's tax year.....

2. Basis from any capital contributions made or additional stock acquired during the tax year..

3. Ordinary income

6. Net gain under Section 1231.....

7. Other income.....

Tax-exempt interest income...

Other tax-exempt income....

10. Net gain on disposition of Section 179 assets.....

11. Oil and gas depletion in excess of basis..... **12.** Other Increases: Description 13. Total Increases : (add lines 3 - 12)..... 1,778 DECREASES: 15. Oil and gas depletion..... 16. Ordinary loss..... 17. Net loss from rental activities..... 0 18. Net portfolio loss..... 0 19. Net loss under Section 1231.... 0 20. Other loss.... 0 21. Charitable contributions.... 0 22. Section 179 expense deduction..... 0 23. Deductions related to portfolio income (loss)..... 0 24. Other deductions..... 25. Investment interest expense..... 26. Total foreign taxes..... 0 27. Section 59(e) expenses..... 28. Prior year loss in excess of basis..... 29. Other Decreases Description 30. Property distributions (including cash)..... 31. Total Decreases..... 32. Stock basis at the end of Tax Year. (Line 1 and line 2 plus line 13 minus line 31)..... 1,778 33. Debt basis at the beginning of Tax Year.... 34. Adjustments to Debt basis Description <u>Am</u>ount 35. Debt basis at the end of Tax Year (Combine line 32 and 33)..... 1,778

List of Codes

This list identifies the codes used on Schedule K-1 for all shareholders. For detailed reporting and filing information, see the specific line instructions, earlier, and the instructions for your income tax return.

Box 10. Other income (loss)

Code

- A Other portfolio income (loss)
- **B** Involuntary conversions
- Section 1256 contracts & straddles
- <u>D</u> Mining exploration costs recapture
- E Section 951A income
- F Reserved for future use
- G Income under subpart F (other than inclusions under section 951A)
- H Other income (loss)

Box 12. Other deductions

- A Cash contributions (60%)
- B Cash contributions (30%)
- Noncash contributions (50%)
- Noncash contributions (30%)
- Capital gain property to a 50% organization (30%)
- E Capital gain property (20%)
- G Contributions (100%)
- Investment interest expense
- Deductions—royalty income
- J Section 59(e)(2) expenditures
- K Reserved for future use
- Deductions—portfolio (other)
- M Preproductive period expenses
- N Commercial revitalization deduction from rental real estate activities

- Reforestation expense deduction
- P Reserved for future use
- Q Reserved for future use

Reserved for future use

S Other deductions

Box 13, Credits

R

- ▲ Low-income housing credit (section 42(j)(5)) from pre-2008 buildings
- B Low-income housing credit (other) from pre-2008 buildings
- C Low-income housing credit (section 42(j)(5)) from post-2007 buildings
- Low-income housing credit (other) from post-2007 buildings
- Qualified rehabilitation expenditures (rental real estate)
- E Other rental real estate credits
- G Other rental credits
- Undistributed capital gains credit
- Biofuel producer creditWork opportunity credit
- K Disabled access credit
- Empowerment zone employment credit
- M Credit for increasing research activities
- N Credit for employer social security and Medicare taxes
- O Backup withholding
- P Other credits

Box 14. Foreign transactions

- A Name of country or U.S. possession
- B Gross income from all sources
- Gross income sourced at shareholder level

Foreign gross income sourced at corporate level:

- D Section 951A category
- E Foreign branch category
- F Passive category
- G General category
- H Other

Deductions allocated and apportioned at shareholder level:

- Interest expense
- J Other

Deductions allocated and apportioned at corporate level to foreign source income:

- K Section 951A category foreign source income
- L Foreign branch category
- M Passive category
- **N** General category
- O Other

Other information:

- P Total foreign taxes paid
- Total foreign taxes accrued
- Reduction in taxes available for credit
- S Foreign trading gross receipts
- Extraterritorial income exclusion
- U Reserved for future use
- V Other foreign transactions

Box 15. Alternative minimum tax (AMT) items

- A Post-1986 depreciation adjustment
- B Adjusted gain or loss
- Depletion (other than oil & gas)
- Oil, gas, & geothermal—gross income
- <u>E</u> Oil, gas, & geothermal—deductions
- E Other AMT items

Box 16. Items affecting shareholder basis

- Tax-exempt interest income
- B Other tax-exempt income
- <u>C</u> Nondeductible expenses
- D Distributions
- E Repayment of loans from shareholders

Box 17. Other information

- A Investment income
- **B** Investment expenses
- Qualified rehabilitation expenditures (other than rental real estate)
- **D** Basis of energy property
- E Recapture of low-income housing credit (section 42(j)(5))
- F Recapture of low-income housing credit (other)
- <u>G</u> Recapture of investment credit
- H Recapture of other credits
- I Look-back interest—completed long-term contracts
- Look-back interest—income forecast method
- K Dispositions of property with section 179 deductions
- L Recapture of section 179 deduction
- M Section 453(I)(3) information
- N Section 453A(c) information
- Section 1260(b) information
- P Interest allocable to production expenditures
- Q CCF nonqualified withdrawals
- B Depletion information—oil and gas
- S Reserved for future use
- T Reserved for future use
- U Net investment incomeV Section 199A
- information

 W Reserved for future use
- X Reserved for future use
- Y Reserved for future use
- Z Reserved for future use
- AA Excess taxable income
- AB Excess business interest income
- AC Gross receipts for section 448(c)
- AD Other information

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ARTEX INC

22-3818576

Schedule K-1 (1120-S) - Qualified Business Income Deduction

| SSTB | Qualified Business | Qualified Business | Section 179 | W-2 Wages | Unadjusted Basis Q | ualified REIT | Oualified PTP |
|---|--------------------|--------------------|-------------|--|----------------------|--|---------------|
| | Income/(Loss) | Income/(Loss) | | | Immediately After D | Laborated Laborate Celor Selection | Income/(Loss) |
| 0.0000000000000000000000000000000000000 | 1,778 | (2.3) | | Annual Control of the | Acquisition | | |
| Total: | 1,778 | · | <u> </u> | 476,234 | | 0 | 0 |
| TOTAL | 1,7/0 | L., | <u></u> | 476,234 | 0 | 0 | 0 |

Form 1125-A

(Rev. November 2018)
Department of the Treasury
Internal Revenue Service

Cost of Goods Sold

► Attach to Form 1120, 1120-C, 1120-F, 1120S, or 1065. ► Go to www.irs.gov/Form1125A for the latest information. OMB No. 1545-0123

| vame | | Employer identification number |
|------|--|--------------------------------|
| ARTE | | 22-3818576 |
| 1 | Inventory at beginning of year | 105,134 |
| 2 | Purchases | 191,480 |
| 3 | Cost of labor | 243,011 |
| 4 | Additional section 263A costs (attach schedule) | 0 |
| 5 | Other costs (attach schedule) | 0 |
| 6 | Total. Add lines 1 through 5 | 539,625 |
| 7 | Inventory at end of year | 229,620 |
| 8 | Cost of goods sold. Subtract line 7 from line 6. Enter here and on Form 1120, page 1, line 2 or the appropriate line of your tax return. See instructions | 310,005 |
| 9a | Check all methods used for valuing closing Inventory: (i) ☐ Cost (ii) ☐ Lower of cost or market (iii) ☐ Other (Specify method used and attach explanation.) ► Check if there was a writedown of subported goods. | |
| b | Check if there was a writedown of subnormal goods | ▶ □ |
| С | Check if the LIFO inventory method was adopted this tax year for any goods (if checked, attach Form 970) | |
| d | If the LIFO inventory method was used for this tax year, enter amount of closing inventory computed under LIFO | |
| е | If property is produced or acquired for resale, do the rules of section 263A apply to the entity? See instructions | Yes X No |
| f | Was there any change in determining quantities, cost, or valuations between opening and closing inventory? attach explanation | If "Yes." |

Section references are to the Internal Revenue Code unless otherwise noted.

What's New

Small business taxpayers. For tax years beginning after December 31, 2017, the following apply.

- A small business taxpayer (defined below), may use a method of accounting for inventories that either: (1) treats inventories as nonincidental materials and supplies, or (2) conforms to the taxpayer's financial accounting treatment of inventories.
- A small business taxpayer is not required to capitalize costs under section 263A.

General Instructions

Purpose of Form

Use Form 1125-A to calculate and deduct cost of goods sold for certain entities.

Who Must File

Filers of Form 1120, 1120-C, 1120-F, 1120S, or 1065, must complete and attach Form 1125-A if the applicable entity reports a deduction for cost of goods sold.

Inventories

Generally, inventories are required at the beginning and end of each tax year if the production, purchase, or sale of merchandise is an income-producing factor. See Regulations section 1.471-1. If inventories are required, you generally must use an accrual method of accounting for sales and purchases of inventory items.

Exception for certain taxpayers. A small business taxpayer (defined below), can adopt or change its accounting method to account for inventories in the same manner as material and supplies that are non-incidental, or conform to its treatment of inventories in an applicable financial statement (as defined in section 451(b)(3)), or if it does not have an applicable financial statement, the method of accounting used in its books and records prepared in accordance with its accounting procedures. See section 471(c)(3),

A small business taxpayer claiming exemption from the requirement to keep inventories is changing its method of accounting for purposes of section 481. For additional guidance on this method of accounting, see Pub. 538, Accounting Periods and Methods. For guidance on changing to this method of accounting, see Form 3115 and the instructions for Form 3115.

Small business taxpayer. A small business taxpayer is a taxpayer that (a) has average annual gross receipts of \$25 million or less (indexed for inflation) for the 3 prior tax years, and (b) is not a tax shelter (as defined in section 448(d)(3)). See Pub. 538.

Uniform capitalization rules. The uniform capitalization rules of section 263A generally require you to capitalize, or include in inventory, certain costs incurred in connection with the following.

- The production of real property and tangible personal property held in inventory or held for sale in the ordinary course of business.
- Real property or personal property (tangible and intangible) acquired for resale.
- The production of real property and tangible personal property for use in its trade or business or in an activity engaged in for profit.

A small business taxpayer (defined above) is not required to capitalize costs under section 263A. See section 263A(i).

See the discussion on section 263A uniform capitalization rules in the instructions for your tax return before completing Form 1125-A. Also see Regulations sections 1.263A-1 through 1.263A-3. See Regulations section 1.263A-4 for rules for property produced in a farming business.

Form 1125-E

Department of the Treasury Internal Revenue Service

Compensation of Officers

► Attach to Form 1120, 1120-C, 1120-F, 1120-REIT, 1120-RIC, or 1120S. ▶ Information about Form 1125-E and its separate instructions is at www.irs.gov/form1125e. OMB No. 1545-0123

Name ARTEX INC

Employer Identification number 22-3818576

Note: Complete Form 1125-E only if total receipts are \$500,000 or more. See instructions for definition of total receipts.

| (a) Name of officer | (b) Social security number | (c) Percent of time devoted to | Percent of s | | (f) Amount of |
|--|----------------------------|--------------------------------|--------------|---------------|------------------------------------|
| | (see instructions) | business | (d) Common | (e) Preferred | compensation |
| ADAM OLDAKOWSKI | 2186 | 100 % | 100 % | 0 % | 74,60 |
| | | <u>%</u> | % | % | |
| | | % | % | % | |
| | | % | % | % | |
| | | % | % | % | |
| | | % | % | % | |
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| | | % | <u>%</u> | % | |
| | | % | % | <u>%</u> | |
| | | % | % | % | |
| The state of the s | | % | % | % | |
| | | % | % | % | |
| | | % | % | % | |
| | | % | % | % | |
| | | %: | % | % | |
| | | % | % | % | |
| | | % | % | % | |
| | | % | % | % | |
| 2 Total compensation of officers | | | | 2 | 74,60 |
| 3 Compensation of officers claimed on F | orm 1125-A or elsewhere o | n return | | 3 | |
| 4 Subtract line 3 from line 2. Enter the appropriate line of your tax return | e result here and on Forn | 1 1120, page | 1, line 12 o | r the | m |
| appropriate line of your tax return r Paperwork Reduction Act Notice, see separa | te instructions | Cat. No. 559 | | 4 | 74,60 1125-E (Rev. 10-20 |

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Department of Taxation and Finance

| | | | | | All filers mu | ıst enter ta | c perio | d: | | |
|--|--|---|--|---|--|---|---------------------------------------|--|-----------------------------|---|
| Final return (see instructions) | nded return | | | | beginning | 01-01- | 22 | ending | 12-31- | -22 |
| Employer identification number (EIN) | File number | Busine | ess telephone nu | ımber | . | If you claim | an ov | erpayment | | |
| 223818576 | | (|) | | | | | | , | L |
| Legal name of corporation | | | | | Trade name/DE | BA . | | | | |
| ARTEX INC Malling address | | | , | | State or country | of Innormaration | | | | |
| Care of (c/o) | | | | | 1 | ERSEY | | | | |
| Number and street or PO Box | | | | - | Date of incorpor | | Foreign | oorporations: | date began busine | ess in M |
| 31 CURRIE AVE | | | | | | 6-01 | _ | | | |
| City U.S. state/Canadian pro Wallington N.J | | 1 | Country (if not t | United | States) | | For off | ice use only | | |
| Hunga | 07057 | | | | New York Sele | rtion effective date | - | | | |
| [] | you need to updat none information for | or corr | r address o poration tax | or V | 1000 1000 000 | ones on contro date | 1 | | | |
| NYS principal business activity | - | or oth | er tax type | s yo | ou can do s | o online. | 1 | | | |
| Has the same of th | | See E | usiness in | | <i>nation</i> in Fo | | | | | |
| Has the corporation revoked its election to be t | | S corpo | oration? | • N | umber of sha | reholders | | | | |
| Yes ● No ● If Yes, enter Pay amount shown on Part 2, line 46. | er effective date: | . Al | V 04-4- | Д_ | 1 | | <u> </u> | | | |
| Attach your payment here. Detach all | check stubs. (See | : new : instruc | YORK State tions for det | Coi ails.) | rporation 1 | ax | $_{\lambda}\vdash$ | Paym | ent enclosed | 25 |
| | | | | nber | | • | , , <u>=</u> | | 0.0 |)574 |
| Enter your business apportionment fa Did the S corporation make an IRC se Did this entity have an interest in real | ctor (from Part 3, line ection 338 or 453 or property located in | ne 56) election n New | 1? York State | dur | (s) here | three year | s? | Yes | s • □ N | |
| Enter your business apportionment fa Did the S corporation make an IRC se Did this entity have an interest in real | ctor (from Part 3, line ection 338 or 453 or property located in | ne 56) election n New | 1? York State | dur | (s) here | three year | s? | Yes | s • □ N | o • |
| Enter your business apportionment fa Did the S corporation make an IRC se Did this entity have an interest in real Has there been a transfer or acquisition | ctor <i>(from Part 3, lin</i> ection 338 or 453 e property located in on of a controlling | ne 56) election n New interes | 1?York State | dur | (s) here | three year | s? | Yes | s • □ N | o • |
| Enter your business apportionment far Did the S corporation make an IRC se Did this entity have an interest in real Has there been a transfer or acquisition If the IRS has completed an audit of an | ector (from Part 3, line ection 338 or 453 or property located in on of a controlling by of your returns we | ne 56) election n New interes vithin th | York State It in this en It is last five the approach termination | duri | ing the last during the l | three year ast three y | s?ears? | Yes | S • No | 0 • 0 0 • 0 |
| Enter your business apportionment far Did the S corporation make an IRC set Did this entity have an interest in real Has there been a transfer or acquisition If the IRS has completed an audit of an | ector (from Part 3, line ection 338 or 453 or property located in on of a controlling by of your returns we nation year, mark of (see New York S co. | ne 56) election n New interes vithin th an X in | York State of in this en the last five you the appropriate the Morma | durity of the priority of the | ing the last during the I s, list years te box to in ear in instruct | three year ast three y | s?ears? | Yes Yes Yes thod of ac aily pro ra | S • No | 0 • o • o • o • o • o • o • o • o • o • |
| Enter your business apportionment far Did the S corporation make an IRC se Did this entity have an interest in real Has there been a transfer or acquisition If the IRS has completed an audit of an If this return is for a New York S terminused for the New York S short year | ector (from Part 3, line ection 338 or 453 expreperty located in on of a controlling by of your returns whation year, mark at (see New York S controlling) | ne 56) election n New interes vithin th an X in | York State of in this en the last five you the appropriate the Morma | durity of the priority of the | ing the last during the I s, list years te box to in ear in instruct | three year ast three y dicate which tions) les | s?ears? | Yes | S • No | 0 • 0 • 0 • 0 • 0 • 0 • 0 • 0 • 0 • 0 • |
| Enter your business apportionment far Did the S corporation make an IRC set Did this entity have an interest in real Has there been a transfer or acquisition If the IRS has completed an audit of an If this return is for a New York S termin used for the New York S short year Mark an X in the box if you are filing Form If you are one of the following, mark a | ector (from Part 3, line ection 338 or 453 ection 338 or 453 exproperty located in on of a controlling by of your returns whation year, mark a (see New York S controlling or CT-3-S as a result on X in one box: | ne 56) election n New interes vithin th an X in proporation | York State st in this en ne last five y n the appro- no termination Norma | duri | ing the last during the I | three year ast three y dicate which ions) ules Qualifie | s? ears? ch met D aw, Art | Yes Yes aily pro ra | S • No | o •] vas on [|
| Enter your business apportionment far Did the S corporation make an IRC set Did this entity have an interest in real Has there been a transfer or acquisition If the IRS has completed an audit of an If this return is for a New York S termin used for the New York S short year Mark an X in the box if you are filing Form If you are one of the following, mark a | ector (from Part 3, line ection 338 or 453 ection 338 or 453 exproperty located in on of a controlling by of your returns whation year, mark a (see New York S controlling) or CT-3-S as a result on X in one box: | ne 56) election n New interes vithin th an X in orporation of the r | York State st in this en ne last five y the appro- on termination Norms mandatory N QETC • | duri | ing the last during the last te box to interest in instruct occupating recounting recoun | three year ast three y dicate which ions) ules Qualified the ch | s? ears? bh met D aw, Art | Yes Yes Yes Aily pro raily pro raily w York ma | S • No | o • o • o • o • o • o • o • o • o • o • |
| Did the S corporation make an IRC set Did this entity have an interest in real Has there been a transfer or acquisition of the IRS has completed an audit of an If this return is for a New York S terminal used for the New York S short year Mark an X in the box if you are filing Form If you are one of the following, mark a If you filed as a New York C corporation | ector (from Part 3, line ection 338 or 453 ection 338 or 453 exproperty located in on of a controlling by of your returns whation year, mark a (see New York S controlling) or CT-3-S as a result on X in one box: | ne 56) election n New interes vithin th an X in orporation of the r | York State st in this en ne last five y the appro- on termination Norms mandatory N QETC • | duri | ing the last during the last te box to interest in instruct occupating recounting recoun | three year ast three y dicate which ions) ules Qualified the ch | s? ears? bh met D aw, Art | Yes Yes Yes Aily pro raily pro raily w York ma | counting ta allocation 660(| N N N v tio |

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| 0 | If you are a foreign corporation c partnerships, mark an X in the | omputing your tax taking box | into account only your | distributive shares from i | multiple limited |
|---------------|--|-----------------------------------|--|--|-----------------------------------|
| P | If you made a voluntary contribut | | | | |
| Par | t 1 – Federal Form 1120S in | formation | | | |
| Prov amo | ride the information for lines 1 t unt column. (Show any negative ar | hrough 10 from the cor | responding lines on ye | our federal Form 11205 | S, Schedule K, total |
| 1 | Ordinary business income or los | is | | | 1,778 |
| 2 | Net rental real estate income or | loss | *************************************** | • 2 | 0 |
| 3 | Other net rental income or loss | | *************************************** | • 3 | 0 |
| 4 | Interest income | | | • 4 | 0 |
| 5 | Ordinary dividends | | ()************************** | • 5 | 0 |
| 6 | Royalties | | *************************************** | 6 | 0 |
| 7 | Net short-term capital gain or los | ss | | 7 | 0 |
| 8 | Net long-term capital gain or los | S | | 8 | 0 |
| 9 | Net section 1231 gain or loss | | | 9 | 0 |
| 10 | Other income or loss | | | • 10 | 0 |
| 77 | Loans to shareholders (from fede | | | | *** |
| 40 | Beginning of tax year • | 43,550 End | | 33,550 | |
| 12 | Total assets (from federal Form 11: | 20S, Schedule L, line 15, co | lumns b and d) | | |
| 49 | Beginning of tax year • | | of tax year • 4 | 97,014 | |
| 13 | Loans from shareholders (from fe | | | | |
| | Beginning of tax year | End o | of tax year • | 0 | |
| Prov (Shou | ide the information for lines 14 v any negative amounts with a minus | through 21 from the co | rresponding lines on y | our federal Form 1120 | S, Schedule M-2. |
| | | A Accumulated adjustments account | B Shareholders' undistributed taxable income previously taxed | C Accumulated earnings and profits | D Other adjustments account |
| 14 | Balance at beginning of tax year | • 24,499 | 0 | 0 | 0 |
| 15 | Ordinary income from federal | | | | |
| | Form 1120S, page 1, line 21 | 1,778 | | | |
| | Other additions | 0 | | | 0 |
| 17 | Loss from federal Form 1120S, | • | | | |
| | page 1, line 21 | 0 | | | |
| 18 | Other reductions | 0 | | | 0 |
| | Combine lines 14 through 18 | 26,277 | 0 | • 0 | 0 |
| | | 0 1 | 0 | 0 | 0 |
| 21 | Balance at end of tax year. | | · | • | • |
| | Subtract line 20 from line 19 | 26,277 | 0 | | o |

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| | t 2 – Computation of tax (see instructions, | | | · · · · · · · · · · · · · · · · · · · | | |
|-------|---|---|-------------------------------|---|---|---|
| Have | you been convicted of an offense, or are you are | ı own | er of an entity con | victed of an offense, def | ined in | —————————————————————————————————————— |
| 146 | ow fork State Penal Law Article 200 of 496, of se | ection | 195.20? (see Forn | n CT-1, mark an X in one bo | ox) _. | Yes 👢 No 🗴 |
| างน | must enter an amount on line 22; if none, ent | er <i>0</i> . | | | | |
| 72 | New York receipts (from Part 3, line 55, column A (| New \ | ork State)) | | • 22 | 60,779 |
| 24 | Fixed dollar minimum tax (see instructions) | • | | | • 23 | 25 |
| 25 | Recapture of tax credits (see instructions) | • | | *************************************** | • 24 | |
| 20 | Total tax after recapture of tax credits (add lines | 23 an | d 24) | | • 25 | 25 |
| 20 | Special additional mortgage recording tax credi | t (cun | ent year or deferred | ; see instructions) | • 26 | 0 |
| Circ. | Tax due after tax credits (subtract line 26 from line | 25) . | | *************************************** | 27 | 25 |
| 20 | t installment of estimated tax for the next to | ях ре | riod: | | | |
| 20 | Enter amount from line 27 | | | | 28 | 25 |
| 20 | If you filed a request for extension, enter amoun | nt fror | n Form CT-5.4, lin | e 2 | • 29 | |
| 30 | If you did not file Form CT-5.4 and line 28 is over | er \$1, | 000, enter 25% (.2 | 25) of line 28. | | 1 |
| 24 | Otherwise enter 0 | | •••••••• | | 30 | 0 |
| Com | Add line 28 and line 29 or 30 | ·· <u>·····</u> | | | 31 | 25 |
| COII | iposition of prepayments (see instructions): | | Date paid | Amount | | · |
| 32 | Mandatory first installment | . 32 | | | | |
| 33 | Second installment from Form CT-400 | 33 | | | Ш | |
| 34 | Third installment from Form CT-400 | 34 | | | \sqcup | |
| 35 | Fourth installment from Form CT-400 | 35 | | | | |
| 36 | Payment with extension request from | | | | | |
| | Form CT-5.4 | | | | | |
| 37 | Overpayment credited from prior years (see insta | ruction | ıs) 37 | | | |
| 38 | Total prepayments (add lines 32 through 37) | | | | • 38 | 0 |
| 39 | Balance (subtract line 38 from line 31; if line 38 is lai | rger th | an line 31, enter 0) | | 39 | 25 |
| 40 | Estimated tax penalty (see instructions; mark an X | in the | box if Form CT-222 | is attached) • | • 40 | _ |
| 41 | Interest on late payment (see instructions) | | ************************* | | • 41 | , |
| 42 | Late filing and late payment penalties (see instru | ctions |) <i></i> | | . • 42 | |
| 43 | Balance (add lines 39 through 42) | | | | 43 | 25 |
| Volu | ntary gifts/contributions | | | | | · |
| 44 | Total voluntary gifts/contributions (from Form CT- | 227, P | art 2, line 1) | | 44 | |
| 45 | Add lines 31, 40, 41, 42, and 44 | | ***************************** | ···· | 45 | 25 |
| 46 | Balance due (If line 38 is less than line 45, subtract | line 38 | 3 from line 45 and er | nter here. This is the amoun | nt - | |
| | due; enter your payment amount on line A on pa | ige 1.) | | | 46 | 25 |
| 47 | Overpayment (If line 38 is more than line 45, subtra | ct line | 45 from line 38 and | enter here. This is the | ··· • | |
| | amount of your overpayment; see instructions.) | · • · · · • · · · · | | | 47 | o |
| 48 | Amount of overpayment to be credited to next p | eriod | (see instructions) | | 48 | ` |
| 49 | Refund of overpayment (subtract line 48 from line | 47; se | e instructions) | | 49 | 0 |
| 50 | Refund of unused special additional mortgage r | ecord | ing tax credit /see | instructions) | 50 | 0 |
| 51 | Amount of special additional mortgage recording | a tax | credit to be applied | d as an overnayment to | · • • • • • • • • • • • • • • • • • • • | |
| | next period | | | an ovorpayment to | ا ہے ا | † |

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| | t 3 – Computation of business apportionment factor (see in | | | |
|------|--|---------|---------------------------------------|---------------------------------------|
| Mark | ${f can} \ {m X}$ in this box only if you have no receipts required to be included in the | he den | ominator of the apportionm | ent factor (see instr.) |
| _ | | | A - New York State | B – Everywhere |
| | tion 210-A.2 | | | |
| 1 | Sales of tangible personal property | 1 | 60,779 | 1,057,507 |
| 2 | Sales of electricity | 2 | | |
| 3 | Net gains from sales of real property | 3 | | |
| | tion 210-A.3 | | | |
| 4 | Rentals of real and tangible personal property | 4 | | |
| 5 | Royalties from patents, copyrights, trademarks, and similar intangible |] | | |
| | personal property | 5 | <u> </u> | |
| 6 | Sales of rights for certain closed-circuit and cable TV transmissions | | | |
| | of an event | 6 | | |
| | tion 210-A.4 | | • | |
| 7 | Sale, licensing, or granting access to digital products | 7 | ļ į | |
| ect | tion 210-A.5(a)(1) - Fixed percentage method for qualified finance | cial in | struments (QFIs) | <u> </u> |
| | To make this irrevocable election, mark an X in the box (see instructions | | | |
| | tion 210-A.5(a)(2) – Mark an X in each box that is applicable (see | | | |
| Sec | ction 210-A.5(a)(2)(A) | | · · · · · · · · · · · · · · · · · · · | · |
| 9 | Interest from loans secured by real property | 9 | | |
| 10 | Net gains from sales of loans secured by real property | 10 | | |
| 11 | Interest from loans not secured by real property (QFI •) | 11 | | |
| 12 | Net gains from sales of loans not secured by real property (QFI •]) • | 12 | | <u> </u> |
| Sec | ction 210-A.5(a)(2)(B) (QFI •) | · | | <u> </u> |
| | Interest from federal debt | 13 | 1 1 | |
| 14 | | [13] | | <u> </u> |
| | Interest from NYS and its political subdivisions debt | 15 | | · |
| 16 | Net gains from federal, NYS, and NYS political subdivisions debt | 16 | | · |
| 17 | Interest from other states and their political subdivisions debt | 17 | | <u> </u> |
| 18 | Net gains from other states and their political subdivisions debt | 18 | | <u></u> |
| | etion 210-A.5(a)(2)(C) (QFI •) | 10 | | <u> </u> |
| | Interest from asset-backed securities and other government agency debt | 40 | | 1 |
| | | 19 | | |
| 20 | Net gains from government agency debt or asset-backed securities | | | 1 |
| 21 | sold through an exchange | 20 | | |
| | Net gains from all other asset-backed securities | 21 | | |
| | tion 210-A.5(a)(2)(D) (QFI •) | | | 1 |
| | Interest from corporate bonds | 22 | | |
| 23 | Net gains from corporate bonds sold through broker/dealer or | 1 1 | | 1 |
| | licensed exchange | | | |
| | Net gains from other corporate bonds | 24 | | <u> </u> |
| | etion 210-A.5(a)(2)(E) | | • | P |
| 25 | Net interest from reverse repurchase and securities borrowing agreements • | 25 | | |
| | tion 210-A.5(a)(2)(F) | | | · · · · · · · · · · · · · · · · · · · |
| | Net interest from federal funds | 26 | | |
| | :tion 210-A.5(a)(2)(I) (QFI ● 🔲) | | | } |
| 27 | Net income from sales of physical commodities | 27 | | |
| Sec | :tion 210-A.5(a)(2)(J) (QFI ● 🔃) | | | , |
| | Marked to market net gains | 28 | | |
| | etion 210-A.5(a)(2)(H) (QFI • 🔲) | | | , |
| | 210-A.5(a)(2)(G) (QFI •) | | | |
| 29 | Interest from other financial instruments | 29 | | |
| 20 | Net gains and other income from other financial instruments | 20 | | <u> </u> |

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0.057474

| 0 | C - 040 4 70 1 | | A – New York State | B - Everywhere |
|----------|---|-------------|--------------------|--|
| | tion 210-A.5(b) | | | |
| 31 | 3 | ● 31 | | |
| 32 | Margin interest earned on behalf of brokerage accounts | • 32 | • | |
| 33 | Fees for advisory services for underwriting or management of underwriting | 33 | • | |
| 34 | Receipts from primary spread of selling concessions | 34 | • | |
| 35 | Receipts from account maintenance fees | . • 35 | - | |
| 36 | Fees for management or advisory services | 36 | • | |
| 3/ | Interest from an affiliated corporation | . ● 37 | - | |
| Sect | ion 210-A.5(c) | | | |
| 38 | Interest, fees, and penalties from credit cards | • 38 | | |
| 39 | Service charges and fees from credit cards | a 39 | • | |
| 40 | Receipts from merchant discounts | 40 | • | |
| 41 | Receipts from credit card authorizations and settlement processing | - 41 | | |
| 42 | Other credit card processing receipts | • 42 | | |
| Sect | ion 210-A.5(d) | | | · |
| 43 | Receipts from certain services to investment companies | • 43 | 1 1 | |
| Sect | ion 210-A.5-a | | | |
| 44 | Global intangible low-taxed income | . • 44 | اموا | |
| ect | on 210-A.6 | . 9 -4-4 | 000 | |
| 45 | Receipts from railroad and trucking business | 45 | | |
| Sect | ion 210-A.6-a | 45 | | |
| 46 | Receipts from the operation of vessels | . • 46 | 1 | |
| ect | on 210-A.7 | 9 46 | | |
| 47 | Receipts from air freight forwarding | | 1 1 | |
| 48 | Receipts from other aviation services | 4/ | | |
| ecti | on 210-A.8 | • 48 | | |
| | Advertising in newspapers or periodicals | اما | ΙM | |
| 50 | Advertising on television or radio | 49 | | |
| 51 | Advertising via other means | 50 | | · · · · · · · · · · · · · · · · · · · |
| ecti | on 210-A.9 | . • 51 | | |
| | Transportation or transmission of gas through pipes | | ļ <u>1</u> | |
| Secti | on 210-A.10 | . • 52 | | |
| | Receipts from other services/activities not specified | | | |
| ecti | on 210-A.11 | • 53 | | |
| | | | | |
| ntel | Discretionary adjustmentsreceipts | • 54 | | |
| | | | | - |
| <u> </u> | Add lines 1 through 54 in columns A and B | • 55 | 60,779 | 105750 |



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| Amended | return information | | | | | | | |
|------------------|---|------------------------------------|-----------------------------------|------------------|--------------------------------|--|--|--|
| | mended return, mark an X in the box for a | ny items that apply and att | ach documentation | | | | | |
| | determination • If marked, enter date of | | | | | | | |
| | Third - party designee (see instructions) Designee's name (print) Designee's phone number () Designee's email address | | | | | | | |
| Certificatio | n: I certify that this return and any attachm | ents are to the hest of my | knowledge and helief | trus samas | PIN | | | |
| Authorized | ADAM OLDAKOWSKI | n Offic | true, correctial title ESIDENT | t, and complete. | | | | |
| person | Email address of authorized person ARTEXINC@GMAIL.COM | Telephone numbe (201) 777 338 | r | Date 03-15-23 | | | | |
| Paid preparer | Firm's name (or yours if self-employed) DK TAX SERVICES INC Signature of individual preparing this return | I.N.O. | Firm's EIN 853118011 | Prepa | rer's PTIN or SSN P02271992 | | | |
| use only | | Address 358 MIDLAND AVE | City Garfield | | ate ZIP code NJ 07026 | | | |
| (see instr.) | Email address of individual preparing this return dktaxy@gmail.com | Preparer's NYTPRIN or | Excl. code | Date 03-15-23 | | | | |

See instructions for where to file.



CT-3-M

Department of Taxation and Finance

General Business Corporation MTA Surcharge Return

| Cai | ution: This form must be used only for tax | | | | A, Section 209 | | If you you | 4 £ | | | | |
|--------------|--|---------------------------------------|---|------------|---|-------------------|---|-----------------|-----------------------|---------------------------|--------------|-----------|
| retu | in will not be processed and will not be o | consi | dered time | ly file | d. As a result, p | enalties and | l interest m | it for ay be | any prior incurred | perioas, I. | the | |
| Г | Amended return | | | | enter tax period: | beginning | 01-01-2 | 22 | ending | 12- | 31-22 | |
| | Employer Identification number (EIN) | | File number | Busin | ness telephone number | | | | | If you claim overpayme | | _ |
| 4 | 223818576 Legal name of corporation | | | Т(| | | | | | an X in the | box | |
| | · | | | | | Trade name/DB | Α | | | | | |
| - | ARTEX INC Mailing address | - | | | | | | | | . <u>.</u> | | |
| | • | | | | | State or country | of incorporation | | | | | |
| - | Care of (c/o) Number and street or PO Box | | | | | <u> </u> | | | | | | |
| | | | | | | Date of incorpora | | Foreig | n corporations | : date began b | usiness in l | NYS |
| 1 | 31 CURRIE AVE City U.S. state/Canadian provin | 200 | ZIP/Postal co | do | Country (16 and 15 attention | 07-2 | 6-01 | | | | | |
| | The state of the s | 100 | | u e | Country (If not United | States) | | For of | lice use only | | | |
| | | | 07057 | | 1 | | | | | | | |
| ľ | If you need to update your address or pho can do so online. See <i>Business informati</i> | one II | ntormation | tor c | orporation tax, c | or other tax t | ypes, you | l | | | | |
| File Inst | this form with your Form CT-3 or CT-3-A. <i>E</i> ructions for Form CT-3-M. | Befor | e completir | ng this | | | · · · · · · · · · · · · · · · · · · · | | | | | |
| 🏠 | Pay amount shown on line 12. Make pa Attach your payment here. Detach all ch | iyable teck | e to: New) stubs (See | ork | State Corporati | on Tax | | <u>,</u> - | Payr | ment enclos | | _ |
| Co | mputation of MTA surcharge | ICON | atuba. (Gee | mou | uctions for details. | <i>)</i> | | <u> </u> | | | 8 | _ |
| | New York State franchise tax (see instruc | | 1 | | | | | | | | | _ |
| 1b | Sum of fixed dollar minimum taxes for m | nemh | ore eubion | t to th | ae MTA surchore | ····· | | 1a | | | 25 | ⊢ |
| 1 | Total New York State franchise tax (add | linae | icia aubjec 1a and 1hi | i to ti | ie ivi i A sui citali | je (see mstru | ictions) • | 10 | | | | ⊢ |
| 2 | | imos Iino 8 | าน ลกน <i>10) .</i> เว | | ••••••• | **************** | | 1 | | | 25 | _ |
| 3 | Apportioned franchise tax (multiply line 1 | hv lin | | | •••••• | | | 3 | | 100 | 0.0000 | <u> %</u> |
| 4 | MTA surcharge (multiply line 3 by 30% (.30 |))) | · · · · · · · · · · · · · · · · · · · | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | ************** | | 4 | _ | | 25 | ⊢ |
| 5a, | 5b, 6 | .,, | *************************************** | ******** | | ***************** | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | 4 | | | 8 | Щ |
| | Total prepayments from line 92 | | | | | | | 7 | | | Δ. | _ |
| 8a | Underpayment (subtract line 7 from line 4) | · · · · · · · · · · · · · · · · · · · | | | | ***************** | | 82 | | | 0 | ⊢ |
| 8b | Additional amount for 2023 MFI (see inst | tructio | ns) | | *************************************** | ***************** | | 8b | | | 8 | \vdash |
| 8c | Total of lines 8a and 8b | | | | | | | 8c | | | 8 | _ |
| 9 | Estimated tax penalty (see instructions; many | ark ai | n X in the bo | x if F | orm CT-222 is atta | ched) | | 00 | | <u> </u> | 0 | \vdash |
| 10 | Interest on late payment (see instructions | for F | orm CT-3 or | CT-3- | -A) | <u>—</u> | | 10 | | | U | |
| 11 | | ee ins | structions fo | r Forn | 3 CT-3 or CT-3-4) | | | 11 | | | | |
| 12 | Balance due (add lines 8c through 11 and e | enter | here: enter: | the pa | syment amount o | n line A abo | vel = | 12 | | | 8 | ⊢ |
| 13a | Excess prepayments (subtract line 4 from | line 7 | 7) | | | | • | 13a | | | 0 | |
| 13b | Amount previously credited to 2023 MFI | l (see | instructions |) | | | | 13b | | | | \vdash |
| 13c | Overpayment (subtract line 13b from line 1 | 3a) | • | , | | | | 13c | | | 0 | <u> </u> |
| 14 | Amount of overpayment to be credited to | o Ne | w York Sta | te fra | nchise tax <i>(see i</i> | nstructions) | | 14 | | | | |
| 15 | Amount of overpayment to be credited to | o MT | A surcharg | e for | next period (see | instructions) | | 15 | | | | \vdash |
| 16 | Amount of overpayment to be refunded | (see i | instructions) | | | ······· | | 16 | | | 0 | \vdash |
| | hedule A – Computation of M | | | | | | | | າຮ) | | | |
| | erage value of property (see instr | | | | A MCTD | | New Yo | 3 rk_Sta | ate_ | | | |
| | Real estate owned (see instructions) | | | 17 | | | | | | | | |
| | Real estate rented (see instructions) | | | 18 | | | | | | | | |
| | Inventories owned | | | 19 | | | | | | | | |
| | Tangible personal property owned (see in | | | 20 | | | | | | | | |
| | Tangible personal property rented (see in | | | 21 | | | | | | | | |
| | Total (add lines 17 through 21 in columns A | | | 22 | | 0 | | | 0 | | | |
| 23 | MCTD property factor (divide line 22 colur | mn A | huling 22 . | nalum | n Dl | | | | 1 00 | | | |

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| Receipts from: (see instructions for lines 24 through 77) | | A MCTD | B New York State |
|---|------------|---------------------------------------|--------------------------------|
| Section 210-A.2 | | · · · · · · · · · · · · · · · · · · · | 1331 1411 1411 |
| 24 Sales of tangible personal property | . 24 | | o |
| 25 Sales of electricity | . 25 | | 0 |
| 26 Net gains from sales of real property | 26 | | 0 |
| Section 210-A.3 | | | |
| 27 Rentals of real and tangible personal property | . 27 | | ٥ |
| 28 Royalties from patents, copyrights, trademarks, and similar intangible | | | <u> </u> |
| personal property | | | o |
| 29 Sales of rights for certain closed-circuit and cable TV transmissions | | | |
| of an event | . 29 | | l ol |
| Section 210-A.4 | | | • |
| 30 Sale, licensing, or granting access to digital products | 30 | | 0 |
| Section 210-A.5(a)(1) - Fixed percentage method for qualified finar | cial instr | uments (OFIs) | |
| 31 If this irrevocable election was made on Form CT-3 or CT-3-A, mark an X in the | ox (see Fo | rm CT-3-I or CT-3-A-I. Pa | art 6, line 8 instructions) 31 |
| | | | |
| Section 210-A.5(a)(2) - Mark an X in each box that is applicable (se | e Form C | T-3-I or CT-3-A-I, Par | t 6, line 8 instructions) |
| Section 210-A.5(a)(2)(A) | | | |
| 32 Interest from loans secured by real property | 32 | | 0 |
| 33 Net gains from sales of loans secured by real property | 33 | | 0 |
| 34 Interest from loans not secured by real property | | | |
| (QFI) | 34 | | 0 |
| 35 Net gains from sales of loans not secured by real property | | | |
| (QFI) | 35 | | 0 |
| Section 210-A.5(a)(2)(B) (QFI) | | | |
| 36 Interest from federal debt | 36 | | 0 |
| 37 | 1 | <u></u> | <u> </u> |
| 38 Interest from NYS and its political subdivisions debt | 38 | | 0 |
| 39 Net gains from federal, NYS, and NYS political subdivisions debt | 39 | | 0 |
| 40 Interest from other states and their political subdivisions debt | 40 | | 0 |
| 41 Net gains from other states and their political subdivisions debt | | | 0 |
| Section 210-A.5(a)(2)(C) (QFI 🔃) | | | |
| 42 Interest from asset-backed securities and other government agency debt | 42 | | 0 |
| 43 Net gains from government agency debt or asset-backed securities | | | |
| sold through an exchange | 43 | | 0 |
| 44 Net gains from all other asset-backed securities | 44 | | 0 |
| Section 210-A.5(a)(2)(D) (QFI 🔲) | | | |
| 45 Interest from corporate bonds | 45 | | 0 |
| 46 Net gains from corporate bonds sold through broker/dealer or | | | |
| licensed exchange | 46 | | 0 |
| 47 Net gains from other corporate bonds | 47 | | 0 |
| Section 210-A.5(a)(2)(E) | | | |
| 48 Net interest from reverse repurchase and securities borrowing agreements | 48 | | o l |
| Section 210-A.5(a)(2)(F) | | | |
| 49 Net interest from federal funds | 49 | | o |
| Section 210-A.5(a)(2)(I) (QFI 🔲) | | | |
| 50 Net income from sales of physical commodities | 50 | | o |
| Section 210-A.5(a)(2)(J) (QFI) | | | |
| 51 Marked to market net gains | 51 | | 0 |
| Section 210-A.5(a)(2)(H) (QFI) | | | |
| 210-A.5(a)(2)(G) (QFI () | | | |
| 52 Interest from other financial instruments | 52 | | 0 |
| 53 Net gains and other income from other financial instruments | 53 | | - 0 |

CT-3-M (2022) Page 3 of 4

| Receipts from: (continued) | ļ | A MCTD | B Nov. Yests Otats |
|--|--|-------------|--|
| Section 210-A.5(b) | - | IVICID | New York State |
| 54 Brokerage commissions | 54 | İ | |
| 55 Margin interest earned on behalf of brokerage accounts | 55 | | 0 |
| 56 Fees for advisory services for underwriting or management of underwriting | 56 | | 0 |
| 57 Receipts from primary spread of selling concessions | 50 | | 0 |
| 58 Receipts from account maintenance fees | 57 | | 0 |
| 59 Fees for management or advisory services | 50 | | 0 |
| 60 Interest from an affiliated corporation | 59 | | 0 |
| Section 210-A.5(c) | 60 | | 0 |
| 61 Interest, fees, and penalties from credit cards | | | |
| 62 Service charges and fees from credit cards | 61 | | 0 |
| 63 Receipts from merchant discounts | 62 | | 0 |
| 64 Receipts from credit card authorizations and settlement processing | 63 | | 0 |
| 65 Other credit card processing receipts | 64 | | 0 |
| Section 210-A.5(d) | 65 | | 0 |
| 66 Receipts from certain services to investment companies | | | |
| Section 210-A.5-a | 66 | | 0 |
| 67 Global intangible low-taxed income | | | |
| Section 210-A.6 | 67 | | |
| 68 Receipts from railroad and trucking business | | | |
| Section 210-A.6-a | 68 | | 0 |
| | | | |
| 69 Receipts from the operation of vessels | . 69 | | o |
| | | | |
| 70 Receipts from air freight forwarding | . 70 | | ol |
| 71 Receipts from other aviation services | . 71 | | 0 |
| | | | |
| 72 Advertising in newspapers or periodicals | . 72 | | |
| 73 Advertising on television or radio | . 73 | | 0 |
| 74 Advertising via other means | . 74 | · · · · · · | 0 |
| ection 210-A.9 | | | |
| 75 Transportation or transmission of gas through pipes | 75 | | 0 |
| ection 210-A.10 | | | |
| 76 Receipts from other services/activities not specified | . 76 | | 0 |
| ection 210-A.11 | | | |
| 77 Discretionary adjustments | . 77 | li l | 0 |
| 78 IOTAL (add lines 24 through 77 in columns A and B) | 78 | 0 | 6 |
| 79 MCTD receipts factor (divide line 78, column A, by line 78, column B) | | | • 79 0.0000 |
| ayroli | | A MCTD | В |
| 80 Wages and other compensation of employees except general | | WOLD | New York State |
| executive officers | 80 | | |
| 81 MCTD payroll factor (divide line 80, column A, by line 80, column B) | | | 81 0.0000 |
| - Total Me TB lactors (add lines 23, 79, and 81) | | | 82 0.0000 |
| world apportionment percentage (Divide line 82 by three; if a factor is mis | sina see ins | structione | |
| Enter here and on line 2.) | | | •_830.0000 |

Page 4 of 4 CT-3-M (2022)

| Compos | ition of prepayments claimed | on line 7 (see instruc | ctions) | Date paid | | Ar | nount | |
|--|---|----------------------------------|---|-------------------|--------|----------------------|---------------------|----------|
| 84 Manda | tory first installment from Form CT-300 (se | ee instructions) | 84 | | | | | Т |
| 85 Secon | d installment from Form CT-400 | ******************************** | 85 | | \neg | | | 十 |
| 86 Third in | | | | | | | | 十一 |
| | | | | | | | | ┿ |
| | | | | | | | 0 | + |
| 89 Overpa | ayment credited from prior years (see instru | ctions) | | | 89 | | | ╫ |
| 90 Add lin | es 84 through 89 | | • | | 90 | | - 0 | ╫╌ |
| 91 Overpa | les 84 through 89 | Period | | | | | <u> </u> | ╫ |
| | repayments (add lines 90 and 91; enter here | | | | 92 | | 0 | +- |
| · | , | | *********** | | VL | ···· | <u> </u> | <u>'</u> |
| Third – pa designed (see instruction | Designee's email address | | | | D (| esignee's phoi | ne number | |
| Certificatio | n: I certify that this return and any attachm | ents are to the best of my I | knowled | ge and belief tru | ue, co | | complete | |
| Authorized | Printed name of authorized person Signature of authorized person | | | Official | | | | |
| person | Email address of authorized person | | elephone number) | | Date | | | |
| Paid preparer | Firm's name <i>(or yours if self-employed)</i> DK TAX SERVICES INC | | Firm's E | IN 853118011 | | Preparer's PT P02 | IN or SSN 271992 | |
| use | Signature of individual preparing this return | Address 358 MIDLAND AVE | - | City Garfield | | State NJ | ZIP code 07026 | |
| only (see instr.) | Email address of individual preparing this return dktaxy@gmail.com | | Preparer's | NYTPRIN or | Excl. | . code Date | 03-15-23 | |

See instructions for where to file.



Department of Taxation and Finance

CT-34-SH

New York S Corporation Shareholders' Information Schedule

| | al name of corporation | Employe | er identification number (EIN |) |
|------|----------------------------------|---|---|--------------------------|
| | TEX INC | | 223818576 | |
| Atta | ch to Form CT- | 3-S | | |
| ScI | une | nareholders' New York State modifications and credits (Ente e New York S corporation on each line. Each shareholder must include nounts on their personal income tax return.) | er the total amount re e their pro rata shar | eported by e of these |
| Par | t 1 – Total sha | reholder modifications related to S corporation items (see instruction | ons) | |
| | Additions | 1 New York State franchise tax imposed under Article 9-A New York taxes imposed under Articles 24-A and 24-B and income taxe imposed by other taxing jurisdictions | s 1a | 0 |
| | | 2 Federal depreciation deduction from Form CT-399, if applicable | 2 | 0 |
| | | 3 Other additions (attach Form CT-225) | 3 | 0 |
| | | 3a New York addition adjustments due to decoupling from the Internal Revo | 3a | |
| 5 | Subtractions | 4 Allowable New York depreciation from Form CT-399, if applicable | 4 | 0 |
| | | 5 Other subtractions (attach Form CT-225) | 5 | 0 |
| | # | 5a New York subtraction adjustments due to decoupling from the IRC | 5a | |
| | Other items | 6 Additions to itemized deductions | 6 | |
| | tach explanation) | 7 Subtractions from itemized deductions | 7 | |
| Par | t 2 – Total S co attach appli | orporation New York State credits and taxes on early dispositions icable forms) | (see instructions; | |
| | | credits (see instructions) | | |
| 8 | START-UP NY I | ousiness certificate number 8 | | |
| 9 | Year of the STA | RT-UP NY business tax benefit period (enter the year number from 1 to 10) | 9 | 0 |
| 10 | START-UP NY t | elecommunication services excise tax credit (Form CT-640) | • 10 | 0 |
| 11 | Recapture of ST | FART-UP NY tax benefits (Form CT-645) | • 11 | |
| 12 | START-UP NY t | ax elimination credit tax-free NY area allocation factor (Form CT-638) | • 12 | 0.0000 |
| 13 | START-UP NY t | ax elimination credit business allocation factor (Form CT-638) | • 13 | 0.0000 |
| | START-UP NY 1 | tax elimination credit factors from partnership (for multiple partnerships attac | h separate statement: se | ee instructions) |
| 14 | START-UP NY F | partnership EIN | • 14 | o interactiona) |
| 15 | START-UP NY | ousiness certificate number (obtain number from your partnership) • 15 | | |
| 16 | Year of the STA | RT-UP NY business tax benefit period (enter the year number from 1 to 10; | | · |
| | | from your partnership) | • 16 | ۸ |
| 17 | START-UP NY t | ax elimination credit tax-free NY area allocation factor (obtain factor from your | · · · | 0 |
| 18 | START-UP NY t | ax elimination credit business allocation factor (obtain factor from your partnersh | • 17 | |
| Inve | stment tax cred | its (see instructions) | (p) • 10 | |
| | | credit and employment incentive credit (Form CT-46) | 19 | |
| 20 | Investment tax of | credit on research and development property (Form CT-46) | | 0 |
| 21 | Will bound in Control | state of 1000 at of and development property (Form 01-40) | • 20 | 0 |
| 22 | Tax on early disa | positions – investment tax credit, retail enterprise tax credit, | <u> </u> | |
| | historic barn o | credit, investment tax credit on research and development property, or investment | | |
| | tax credit for f | inancial services industry (Form CT-44 or CT-46) | nent | |
| Emp | ire zone (EZ) ta | x credits (see instructions) | • 22 | 0 |
| | | ax credit (Form CT-603) | | - |
| 24 | | | • 23 | 0 |
| | Recaptured tax | credit – EZ investment tax credit or EZ investment tax credit for financial serv | iono I | |
| | industry (Form | CT-603 or CT-605) | 1000 | |
| | | | • 25 | 01 |

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| | lified empire zone enterprise (QEZE) tax credits (see instructions) | | | |
|------|---|-----------------|-------------------|-------|
| | QEZE real property tax credit allowed (Form CT-606) | | 26 | 0 |
| 27 | Net recapture of QEZE real property tax credit (Form CT-606) | | 27 | 0 |
| 28 | QEZE tax reduction credit employment increase factor (Form CT-604) | | 28 | 0.000 |
| 29 | QEZE tax reduction credit zone allocation factor (Form CT-604) | | 29 | 0.000 |
| 30 | QEZE tax reduction credit benefit period factor (Form CT-604) | | 30 | 0.000 |
| | QEZE tax reduction credit factors from partnership (for multiple partnerships attach separate | e statem | ent; see instruct | ions) |
| 31 | QEZE partnership EIN | | 31 | ··· |
| 32 | QEZE employment increase factor (obtain factor from your partnership) | | 32 | 0.000 |
| 33 | QEZE zone allocation factor (obtain factor from your partnership) | | 33 | 0.000 |
| 34 | QEZE benefit period factor (obtain factor from your partnership) | | 34 | 0.000 |
| arr | ners' school tax credit (see instructions) | | | |
| 35 | Total acres of qualified agricultural property | | 35 | |
| 36 | Total amount of eligible school district property taxes paid | | 36 | |
| 37 | Total acres of qualified agricultural property converted to nonqualified use | | 37 | · |
| 38 | Total acres of qualified conservation property | | 38 | |
|)the | er credits (attach applicable forms) | | | |
| 39 | Recapture of alternative fuels credit (Form CT-40) | | 39 | 0 |
| 40 | | | 40 | |
| 41 | Rehabilitation of historic properties credit (Form CT-238; also see Form CT-34-SH-I regarding | | | |
| | project number reporting) | | 41 | ol |
| 42 | Recapture of rehabilitation of historic properties credit (Form CT-238) | | 42 | 0 |
| 43 | Clean heating fuel credit (Form CT-241) | | 43 | 0 |
| 44 | , | | 10 | |
| 45 | Empire State commercial production credit (Form CT-246) | | 45 | 0 |
| 46 | Empire State film production credit for the current year (Form CT-248) | | 46 | 0 |
| 47 | Empire State film production credit for the second year (Form CT-248) | | 47 | |
| 48 | Empire State film production credit for the third year (Form CT-248) | | 48 | |
| 49 | Long-term care insurance credit (Form CT-249) | | 49 | 0 |
| 50 | Credit for purchase of an automated external defibrillator (Form CT-250) | | 50 | 0 |
| 51 | Empire State film post-production credit for the current year (Form CT-261) | | 51 | 0 |
| 52 | Empire State film post-production credit for the second year (Form CT-261) | | 52 | |
| 53 | Empire State film post-production credit for the third year (Form CT-261) | | 53 | |
| 54 | Excelsior jobs tax credit component (Form CT-607) | | 54 | 0 |
| 55 | Excelsior investment tax credit component (Form CT-607) | | 55 | 0 |
| 56 | Excelsior research and development tax credit component (Form CT-607) | | 56 | 0 |
| 57 | Excelsior real property tax credit component (Form CT-607) | | | 0 |
| 7a | Excelsior child care services tax credit component (Form CT-607) | | 57a | 0 |
| 58 | Recapture of excelsior jobs program tax credit (Form CT-607) | | 58 | - 0 |
| 59 | Brownfield redevelopment tax credit site preparation credit component (Form CT-611) | | 50 | 0 |
| 60 | Brownfield redevelopment tax credit tangible property credit component (Form CT-611) | | 60 | 0 |
| 61 | Brownfield redevelopment tax credit on-site groundwater remediation credit component (Form C | T-611) a | 61 | 0 |
| 62 | Recapture of brownfield redevelopment tax credit (Form CT-611) | 1-011) | 62 | |
| 63 | | | 63 | 0 |
| 64 | | | 64 | 0 |
| 65 | Brownfield redevelopment tax credit on-site ground water remediation credit component (Form CT- | | 65 | 0 |
| | Recapture of brownfield redevelopment tax credit (Form CT-611.1) | ·• (1.1) • - | 66 | |
| 67 | Brownfield redevelopment tax credit site preparation credit component (Form CT-611.2) | | 66 | |
| 68 | Brownfield redevelopment tax credit tangible property credit component (Form C7-611.2) | | 67 | 0 |
| 69 | Brownfield redevelopment tax credit on-site ground water remediation credit component (Form CT-611.2) | | 68 | 0 |
| 70 | Recapture of brownfield redevelopment tay gradit (Form CT- | -011.2) • | 69 | 0 |
| 71 | Recapture of brownfield redevelopment tax credit (Form CT-611.2) | | 70 | |
| | Recapture of remediated brownfield credit for real property taxes (Form CT-612) | | [1] | 0 |

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| Par | 2 – Total S corporation New York State credits and taxes on early dispositions (con | tinue | ed) |
|-----|--|-------------|------|
| 73 | Environmental remediation insurance credit (Form CT-613) | 73 | 0 |
| 74 | Recapture of environmental remediation insurance credit (Form CT-613) | 74 | |
| 75 | Security officer training tax credit (attach Form CT-631). | 75 | |
| 76 | Economic transformation and facility redevelopment program jobs tax credit component | <u> </u> | |
| | (Form CT-633) | 76 | l ol |
| 77 | Economic transformation and facility redevelopment program investment tax credit component | -10 | |
| | (Form CT-633) | 77 | o |
| 78 | Economic transformation and facility redevelopment program job training tax credit component | ! '' | |
| | (Form CT-633) | 78 | اه |
| 79 | Economic transformation and facility redevelopment program real property tax credit component | 70 | |
| | (Form CT-633) | 79 | o |
| 80 | Recapture of economic transformation and facilities redevelopment program tax credit (Form CT-633) | 80 | |
| 81 | Taxicabs and livery service vehicles accessible to persons with disabilities credit (Form CT-236) | 81 | |
| 82 | QETC employment credit (Form DTF-621) | 82 | 0 |
| 83 | QETC capital tax credit (Form DTF-622) | 02 | |
| 84 | Recapture of QETC capital tax credit (Form DTF-622) | 83 | |
| 85 | Low-income housing credit (Form DTF-624) | 84 | |
| 86 | Recapture of low-income housing credit (Form DTF-626) | 85 | |
| 87 | Empire state jobs retention credit (Form CT-634). | 86 | |
| | Recenture of empire state inhe retention gredit /Form 07 and | 87 | 0 |
| 89 | Recapture of empire state jobs retention credit (Form CT-634) | 88 | |
| an | New York youth jobs program credit (Form CT-635) | 89 | |
| 94 | Alcoholic beverage production credit for beer (Form CT-636) | 90 | |
| 02 | Alcoholic beverage production credit for cider (Form CT-636) | 91 | |
| 02 | Alcoholic beverage production credit for wine (Form CT-636) | 92 | |
| 04 | Alcoholic beverage production credit for liquor (Form CT-636) | 93 | |
| 05 | Alternative fuels and electric vehicle recharging property credit (Form CT-637) | 94 | |
| | Recapture of alternative fuels and electric vehicle recharging property credit (Form CT-637) | 95 | |
| 96 | Deal promote have not little and the first of the second | _ | |
| 97 | Real property tax credit for manufacturers (Form CT-641) | 97 | |
| 30 | Recapture of real property tax credit for manufacturers (Form CT-641) | 98 | |
| 99 | Empire state musical and theatrical production credit (Form CT-642). | 99 | 0 |
| 00 | Hire a veteran credit (Form CT-643) | 100 | 0 |
| 01 | Workers with disabilities tax credit (Form CT-644) | 101 | |
| 02 | Employee training incentive program tax credit (Form CT-646) | 102 | 0 |
| 03 | Farm workforce retention credit (Form CT-647) | 103 | |
| 04 | Life sciences research and development tax credit (Form CT-648) | 104 | |
| 05 | Farm donations to food pantries credit (Form CT-649; also see Form CT-34-SH-I regarding additional | | |
| | informational reporting) | 105 | |
| 06 | Empire State apprenticeship tax credit (Form CT-650) | 106 | |
| 07 | Recovery tax credit (Form CT-651) | 107 | |
| 80 | Employer-provided child care credit (Form CT-652) | 108 | |
| 09 | New York City musical and theatrical production tax credit (Form CT-654) | 109 | |
| 10 | Restaurant return-to-work credit (Form CT-655) | 110 | 0 |
| 11 | Grade number 6 heating oil conversion credit (Form CT-656) | 111 | |
| 12 | COVID-19 capital costs credit (Form CT-657) | 112 | |
| 13 | Additional restaurant return-to-work tax credit (Form CT-658) | 113 | |
| 14 | Other tase and although an activities and a second a second and a second a second and a second a | 114 | |
| | | | |

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| Schedule B - Shareholders' identifying in | nformation (see instructions) | | _ |
|---|--|---------------------------------|---|
| Photocopy Schedule B as needed. Attach all additional | | in the box. $lacksquare$ | |
| A For each shareholder, enter last name, first name, middle initial on first line; enter home address on second and third lines. (attach federal Schedule K-1 for each shareholder) | B Identifying number (SSN or EIN) | C Percentage of ownership | Shareholder residency status (make only one entry) (make only one entry) 1 for New York State 2 for New York City 3 for Yonkers 4 for NYS nonresident |
| 1 ADAM OLDAKOWSKI | • | • | • |
| 105 HAYWARD PL APT 2 | 2496 | 1100 | |
| Wallington NJ 07057 | 1 2186 | 100 | 4 1 |
| 2 | 2 | | |
| 3 | | • | |
| | 3 | | |
| 4 | | • | • |
| | 4 | | |
| 5 | • | - | • |
| | 5 | | |
| 6 | • | • | • |
| | 6 | | |
| 7 | • | • | • |
| | 7 | | |
| 8 | • | • | • |
| | 8 | | |
| 9 | • | • | • |
| | 9 | | |
| 10 | • | • | • |
| | 10 | | |
| 11 | | • | • |
| | 11 | | |

CALCULATION OF FEDERAL TAXABLE INCOME FOR S CORPORATIONS ATTACH TO FORM NYC-1, NYC-3A, NYC-3L, NYC-4S OR NYC-4SEZ

All federal Subchapter S Corporations must complete this schedule and include it when filing Form NYC-1, NYC-3A, NYC-3L, NYC-4S, or NYC-4SEZ. Amounts on Part I, Lines 1 through 8, 12 and 13 and Part II, Lines 15 through 18 are carried from your Federal form 1120S.

| For | CALENDAR YEAR or FISCAL YEAR beg | jinning | | and | ending | J | | | | |
|----------|--|---|--|--------------------------------|--|-----------------------|------------|-----------|--------------|--|
| Na | ame as shown on NYC-1, NYC-3A/ATT, NYC-3L, NYC-4S or N | YC-4SEZ | | EMPLOYER IDENTIFICATION NUMBER | | | | | | |
| AF | TEX INC | | | 2 | , 2 |]_ [| 3 | 8 1 8 5 7 | Г | |
| <u> </u> | | | · · · · · · · · · · · · · · · · · · · | | | _ | | | | |
| | ART I - ADDITIONS TO ORDINARY BUSI | NESS INCOME From Federal Form 11209 | N 178 199 | | St. St. St. | | | | | |
| 1. | Ordinary business income (loss) | | | | | | | 1,778 | 10,431.44 | |
| 2. | Net rental real estate income (loss) | | | | | | 1. | 0 | _ | |
| 3. | Other net rental income (loss) | • | | | | | 2. | 0 | | |
| 4a. | Interest income | | | | | | 3. | | | |
| 4b. | interest Expense Addback | , | | | | | 4a | | | |
| 5. | Ordinary dividends | | | | | | 4b | | - | |
| 6. | | , | | 有效的 死此是 | | 対し関 | 5. | 0 | | |
| 7. | Royalties | , | | | | 0 | 6. | | 40.42 | |
| ۰. 8. | Net short-term capital gain (loss) | , , , , , , , , , , , , , , , , , , , | 7. | | | 0 | | | | |
| | Net long-term capital gain (loss) | , , _,,, -,, -, | 8 | | _ | + | | | | |
| 9. | Sum of lines 7 and 8 | | 9. | | | 0 | | | | |
| 10. | Capital Loss Carryover | | [10.] | Teletae | 7.4. T. | | 44. 44. | | | |
| 11. | Net Capital Gain | | | 13 4 M | | | 11 | . 0 | | |
| 12. | Net Section 1231 gain (loss) | Schedule K, Line 9 | | | | | 12 | 0 | ļ | |
| 13. | Other income (loss) | See Instructions | | | | | 13 | 0 | | |
| 14. | TOTAL ADDITIONS | | | | | | | | | |
| | (Sum of lines 1 through 6 plus lines 11 through 13) | · · · · · · · · · · · · · · · · · · · | 1 | | | | 14. | 1,778 | | |
| P | RT II - DEDUCTIONS FROM ORDINARY | BUSINESS INCOME | | | | - COT- | | | | |
| 15 | Make applicable adjustments for | | ent of Items 15 | thro | ugh | 21 | | | 1 | |
| | Section 179 deduction | Schedule K, Line 11 | | | | | 15 | | | |
| | Contributions | Schedule K, Line 12a | | | ories Ories | i diamenta Lapanta | 16 | | | |
| | Interest expense | See Instructions | i di | | 成的。自 180×年 | 50 A | 17 | . 0 | <u> </u> | |
| | Other deductions | Schedule K, Line 12c See Instructions | | | la de la composición dela composición de la composición dela composición de la composición de la composición dela composición dela composición de la composición de la composición dela composición dela composición dela composición dela composición | 45,0 FG 14 - 43 | 18 | | <u></u> | |
| | Intentionally Omitted | See msauctions | | | | | 19 | · | | |
| | TOTAL DEDUCTIONS | g Sell Sell Sellin egen eine Gebouwer. Die Sell | | | | | 20 | | 5/23/15 | |
| | (Sum of lines 15 through 20) | i de la composición br>La composición de la | | | | | 21 | . 0 | | |
| PΔ | RT III - CALCULATION OF FEDERAL TA | XABLE INCOME | | | | | | | | |
| | | | ARABOLA GA | | rie di | Modelle. | | | | |
| 22. | Federal Taxable Income | See Instructions | | | | | 22 | 1,778 | | |



Office of Processing and Taxpayer Services W A Harriman Campus, Albany NY 12227-0865

New York State requires this income tax return to be filed electronically.

Attention tax return preparer:

Most tax return preparers are required to e-file their clients' New York State tax returns. Because this return was prepared using software, you **MUST** use e-file. If you file a paper New York State tax return, you will be in violation of New York State law.

Preparers who file paper returns are subject to penalties.

Avoid penalties and e-file this return.

Attention taxpayer:

New York State law requires this return to be filed electronically. If your tax return preparer has provided you with a paper New York State tax return with instructions to mail it, contact that preparer and request that the return be electronically filed.

- No charge for e-filing: New York State Tax Law prohibits your tax preparer from charging you a separate or additional fee for e-filing your New York State tax return.
- Faster tax refunds: New York State tax refunds on e-filed returns are twice as fast as refunds on paper returns.
- Most New Yorkers enjoy the benefits of e-filing.

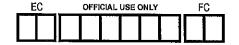
Questions?

Visit our website for more information about New York's e-file mandate.

| PA-20S/PA-65 (05-22) (Page 1 of 3) | | 202 orporation/F OTER ONE LET | Partner | | orma | | urn | Extension Requ | .iested | N N |
|---|--|--|--|----------------------|-------------|-------------|-------------|--|---------------------|---|
| Filing Status: | PA-20S | Y PA-65 | N | P-S KO | 1 7. | N | | Final Return | | N |
| 223818576 C | | 2383 | | | ctive | " | | FEIN/Name/Ad Change | ddress | N |
| ARTEX INC | | | | | | | | Amended Infor Return | mation | N |
| 31 CURRIE AVE | | | F | Fiscal Year; | N | Short Year: | N | Method of Accordance A=Accrual, C=O=Other, Description | :Cash, | C |
| Wallington | NJ | 07057 | | | | | | Date activity began in PA | وتروتو | 2022 |
| SECTION I. Total Taxable 1a Taxable Business Income 1b Share of Business Income 1c Total Income (Loss). Add 1d Previously Disallowed Cl 1e Total Adjusted Business SECTION II. Apportionee 2 Net Business Income (Lo (2a = Outside PA) (2e = 2 Share of Business Income (2b = Outside PA) (2f = 1 2 Previously Disallowed PA (2c = Outside PA) (2g = 2 2 Calculate Adjusted/Apport (2d = Outside PA) (2h = 2 3 Calculate PA) (2h = 3 4 Calculate PA) (2h = 3 5 Calculate PA) | (Loss) from O e (Loss) from A d Line 1a and I NI Deductions Income (Loss d/Allocated I ss) PA Source) e (Loss) from C PA Source A Source CNI E PA Source PA Source PA Source PA Source PA Source | perations Everywall Other Entities Line 1b - PAS Corporat S. Subtract Line 1 PA-Taxable Bush Other Entities Deductions - PAS siness Income (Lo | vhere ions only ld from Li siness Inc Corporat oss) | ine 1c come (Loss | | e | | bcd e aebfcgd | -77. 72. -73. | 78 0 0 |
| SECTION III. Allocated (Interest Income from PA (Dividend Income from PA (Net Gain (Loss) from PA (5a = Outside PA) (5b = Rent/Royalty Net Income (6a = Outside PA) (6b = Estates or Trusts Income (7a = Outside PA) (7b = Gambling and Lottery Wi (8a = Outside PA) (8b = Total Other PA PIT Income (SUBMIT ALL SUPPOR | Schedule A A Schedule B Schedule D PA Source) (Loss) from PA PA Source) from PA Sched PA Source) innings (Loss) PA Source) ome (Loss) | A Schedule M, Palule J from PA Schedule | art B | | | | 34556677889 | a b a b a b a b | | 000000000000000000000000000000000000000 |



Page 1 of 3



PA-20S/PA-65 - 2022 (05-22) (Page 2 of 3)

223818576 C ARTEX INC

| SECTION IV. Total PAS Corporation or Partnership Income (Loss) | | |
|---|-----------------|--------------|
| 10 Total Income (Loss) per Books and Records | 10 | |
| 11 Total Reportable Income (Loss). Add Lines 1e and 9 or Add Lines 2h and 9 | 111 | ጔ ን78 |
| 12 Total Nontaxable/Nonreportable Income (Loss). Subtract Line 11 from Line 10 | 12 | -1778 |
| SECTION V. Pass Through Credits - See the PA-20S/PA-65 instructions | | |
| 13a Total Other Credits. Submit PA-20S/PA-65 Schedule OC | l∃a | |
| 13b Resident Credit | 13b | |
| 14a PA 2022 Quarterly Tax Withholding/Extension Payments for Nonresident Owners | 14a | |
| 140 Final Payment of Nonresident Withholding Tax | 14b | 0 |
| 14c Total PA Income Tax Withheld. Add Lines 14a and 14b | 14c | 0 |
| SECTION VI. Distributions - See the PA-20S/PA-65 instructions | - /- | щ |
| Partnerships Only | | |
| Distributions of Cash, Marketable Securities, and Property | 15 | |
| 16 Guaranteed Payments for Capital or Other Services | ЪЬ | |
| 17 All Other Guaranteed Payments for Services Rendered | 17 | |
| 18 Guaranteed Payments to Retired Partners | 18 | |
| Distributions - See the PA-20S/PA-65 instructions | | |
| PAS Corporations Only | | |
| 19 Distributions from PA Accumulated Adjustments Account | 19 | 0 |
| 20 Distributions of Cash, Marketable Securities, and Property | 20 | ō l |
| | | _ |
| | | |
| SECTION VII Other Information Co. II. Dt. 2007Dt. 471 | ·· · | |

SECTION VII. Other Information-See the PA-20S/PA-65 instructions for each line

| | 13 17 17 Other fine matter-see the PA-205/PA-65 instructions for each line | | | |
|-----|--|-----|----|---|
| 1 | During the entity's tax year, did the entity own any interest in another partnership or in any foreign entity that was disregarded as an entity separate from its owner under federal regulations Sections 301.7701-2 and 301.7701 If yes, submit statement. | -3? | 1 | N |
| 2 | Does the entity have any tax-exempt partners/members/shareholders? If yes, submit statement. | | 2 | N |
| 3 | Does the entity have any foreign partners/members/shareholders (outside the U.S.)? If yes, submit statement. | | 3 | N |
| 4 | was there a distribution of property or a transfer (e.g., by sale or death) of a partner/member interest | | _ | |
| | during the tax year? (Partnership only) If yes, submit statement. | | 4 | N |
| 5 | Has the federal government changed taxable income as originally reported for any prior period? If yes, indicate period on supplemental statement, and submit final IRS determination paperwork. | | | |
| 6 | Does the entity elect to be subject to assessment and the state of the subject to be subject to assessment and the state of the subject to be subject to assessment and the state of the subject to be subject to assessment and the subject to be subje | | 5 | N |
| 7 | Does the entity elect to be subject to assessment at the entity level under Act 52 of 2013? | | 6 | N |
| , | Is this entity involved in a reportable transaction, listed transaction, or registered tax shelter within this return? If yes, submit statement. | | 7 | N |
| 8 | Does the entity filing as a partnership have other partnerships as partners? | | | |
| 9 | Has the entity sold any tax credits? If yes, submit statement. | | 8 | N |
| 10 | Has the entity changed its method of concenting for fact at the | | 9 | N |
| - • | Has the entity changed its method of accounting for federal income tax purposes during this tax year? If yes, submit federal Form 3115. | | 10 | N |
| 11 | Has the entity entered into any like-kind exchanges under IRC Section 1031? If yes, submit federal Form 8824. | | 11 | N |
| 12 | PA Apportionment as reported on PA-20S/PA-65 Schedule H-Corp | 12 | | 0 |
| | | | | |

Page 2 of 3



| | | PA-20\$/P/ (05-22) (P | | | 220 | 6211027 | | | | |
|--------------|--------------------------|--------------------------|---|---------|--|------------------|-------------------|------------------------|---------------------------------------|-------------|
| 5538 | 818576 | С | ART | EX | INC | | | | | |
| | | | | | - Accumulated Adjustm | ents Account (A | AA) and Acci | ımulated Earniı AAA | ngs and Profits (AE | |
| | alance at the | | | | | | 1 | ААА | ALC | XF |
| | otal reportab | | | | • | | 2 | ጔ ?" | 78 _{N/} | A |
| | ther addition | | | d state | ement. | | 3 | | | |
| | oss from Sec | | | | | | 4 | 1 7 | 78 N/ | A |
| | ther reductions of Lines | | | ea sta | atement. | | 5 | | | - |
| | istributions | i muongn. | , | | | | 6 | | 0 | |
| | | able vear-e | nd. Subtra | et Lii | ne 7 from Line 6. | | 7 8 | | 0 | _ |
| | | abio jour c | na. Dabaa | | io / Hoia Earle o. | | • | | U | L |
| Instruc | tions for fur | her details. | | D | S box. If the income (loss) | a arom a aronge | NAME & ADD | | med yes in the I | J 100x. 300 |
| A | | | | | | | | | | |
| В | | | | | | | | | | |
| С | | | | | | | | | | |
| D | | | | | | | | | | |
| Under p | ION X. Si | riury. I decl | are I have e | xamir | ned this return, including acco | ompanying schedu | iles and statemen | ts, and to the best | of my knowledge a | nd |
| | pe name of gen | | | ation (| of paid preparer is based on al | | | | 1 | |
| | r authorized inc | | теграг | | Signature of general officer or authorized | | Date | | Daytime Phone no. | |
| Paid P | reparer's I | Jse Only | | | The contract of | | | | | _ |
| | pe preparer's na | | | | Preparer's signature | | Date | | Check if | 7 |
| <u>Da</u> mi | an Kol | niero | wicz | | Kely Lin | | 0.3 | 152023 | self-employed L | |
| Firm's n | ame (or yours i | f self-employe | *************************************** | TAX | SERVICES INC | <u> </u> | | | Daytime Phone no. | |
| Firms's a | address 358 | MIDL | AND A' | ۷E | Garf | ield | 7.0 | 05P | 97380926 | 87 |
| | | | | | | | P | reparer's PTIN | Firm's FEIN | <u>-</u> - |
| | | | | | E-File Opt Out | N | | 2271992 | · · · · · · · · · · · · · · · · · · · | |
| | | | | | Pag | je 3 of 3 | <u> </u> | · | | |

DEPARTMENT USE ONLY

PA CORPORATE NET INCOME TAX REPORT 2022

STEP A:

Tax Year Beginning

07075055

Tax Year Ending

75375055

STEP B:

Economic Nexus Revenue ID

Federal EIN
NAICS code

223818576 238300 Parent Corporation EIN

Corporation Name

Address Line 1

ARTEX INC 31 CURRIE AVE

Address Line 2

City

Wallington

State ZIP

NJ 07057

Province Country Code Foreign Postal Code

Address Change

Ν

IRS Filing Type

A = 1120 B = 1120S C = Other

STEP C:

N Initial Report

N Final Report (must include REV-861 and REV-181, where applicable)

Amended Report

N File Period Change N Change Fed Group

N 52-53 Week Filer

N S Corp filing as C Corp

N KOZ/SDA CREDIT

N Royalty/Related Interest Add-Back (Act 52 of 2013)

N S Corp Taxable Built-in Gains
 N Section 381/382/Merger NOLs
 N Alternative Apportionment

Claiming P.L. 86-272 Protection

SECTION A: GENERAL INFORMATION QUESTIONNAIRE

1. State of Incorporation:

Ν

ΝJ

2. Date of Incorporation: (MMDDYYYY)

0.4575007

3. Date Commenced Doing Business in PA:

Describe corporate activity in PA:

CONSTRUCTION

5. Describe corporate activity outside PA:

6. Other states in which taxpayer has activity:

7. Does this corporation own all or a majority of stock in other corporations?

N If yes, include the REV-798, Schedule X.

8. Has the federal government changed taxable income as originally reported for any period for which reports of change have not been filed?

If yes, file the RCT-128C.

Ν



REVENUE ID TAX YEAR END 12312022 NAME ARTEX INC RCT-101 07-22 PAGE 2 OF 4 PA CORPORATE NET INCOME TAX REPORT 2022

| ••• | | O, 22 I I | 10L 2 01 | | AIE NEI INC | | _ | | |
|---|---|--|---|---|--|--------------------------|---|--------------------------|----------------------------|
| SE | CTION B: | SCHEDU | ILE C-1: APP | ORTIONMENT SCHE | DULE FOR COR | PORATE NET | INCOM | IE TAX (Include I | RCT-106.) |
| Sal | es Factor | | | | | Special Apport | ionment | | |
| | es - PA es - Total | TB TV | | 0 0 | | Numerator Denominator | 58 54 | | 0 |
| Sale | es Factor |]₁C | 0 | | | Special Apportionment | 2C | ۵ | |
| SE | CTION C: | PA CORI | PORATE NET | INCOME TAX | | | | USE WHOLE DOLLA | ARS ONLY |
| 1. | | | | a separate-company basis. | | | 1 | | |
| 2, | 2B. Intere 2C. Currer 2D. Other | rate dividen st on U.S. s nt yr. addtl. (from REV-1 | ecurities (GROSS PA deprec. plus a 860, Schedule OI | n REV-798, Schedule C-2, L INTEREST minus EXPENSE Idjust. for sale (REV-1834, D) See instructions. Through 2D and enter the r | Sched. C-8, Line 8). | · | 2A 2B 2C 2D | | 0 0 0 0 |
| 3. | 3B. Curren 3C. Intang 3D. Other | imposed on it year bonu ible expense (from REV-1 | s depreciation (F e or related intere 360, Schedule OA | net income (from REV-860 EV-1834, Sched. C-8, Line est expense (REV-802, Sche) See instructions. rough 3D and enter the res | 3). ed. C-6; must include | | AE BE DE CE | | 0 0 0 0 |
| 4. 5. 6. 7. 8. 9. 10. 11. 12. | Total nonbu Income or Apportionm Income or Nonbusines PA taxable Total net of PA taxable | usiness inco loss to be a nent (from S loss apporti iss income or income or lo perating loss income or lo anufacturing | me or loss (from pportioned (Line Schedule C-1, 1C) oned to PA (Line loss allocated to coss after apportions deduction (from coss (Line 10 minuous) | o PA (from REV-934, Colum onment (Line 8 plus Line 9) o RCT-103, Part A, Line 4). | ; must include REV-9 ortionment). In A, Total; must incl). | ude REV-934). | 4 5 7 8 7 10 11 12 13 | | 0 0 0 0 0 0 |
| 14. 15. | PA corporat Credit for ta | te net incom ax paid by a | ne tax ((Line 12 · affiliate(s) for inta 7: must include | - Line 13) times 0.0999). : angible expense or related REV-803). | If line 12 is less than interest expense | zero , enter "0". | 1.4 1.5 | | 0 0 |
| 16. 17. 18. 19. 20. | Tax Liability Credit for C Estimated F Restricted C | (Line 14 m CNI Tax With Payments & Credits (can | ninus line 15), nholding (from PA Credits on Depos not exceed line 1 | Schedule CP, line 16). sit. | | | 16 17 18 19 20 | | 0 0 0 |



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| 7 0 | 7 ~ | _ | 1 – – | - | • |
|-----|-----|-------|-------|-----|---|
| ЪU | ШL | ! U C | : = : | 335 | ı |

REVENUE ID TAX YEAR END 75375055 NAME ARTEX INC RCT-101 07-22 PAGE 3 OF 4 PA CORPORATE NET INCOME TAX REPORT 2022

SECTION D: TRANSFER/REFUND METHOD

Transfer (Amount to be credited to the next tax year after offsetting all unpaid liabilities). ŀ 2.

Refund (Amount to be refunded after offsetting all unpaid liabilities). 2

DIRECT DEPOSIT: Banking rules do not permit direct deposit to bank accounts outside the U.S. If your bank account is outside the U.S., do not complete the direct deposit field or bank routing and account number information below in this case, and you will receive a check from the Department. If your refund will be going to a bank account within the U.S., you have the option to have your refund directly deposited.

Direct Deposit

Routing #

Account #

C=Checking S=Savings

SECTION E: BULK SALE

*Schedule of Disposition of Assets, REV-861, must be completed and filed with this report.

Has the corporation sold or transferred in bulk, 51 percent or more of any class of assets? (See instructions.)

If yes, enter the following information. (Include a separate schedule if additional space is needed.)

Purchaser Name

Address Line 1

Address Line 2

City

State ZIP

Province

Country Code

Foreign Postal Code

SECTION F: SCHEDULE OF REAL PROPERTY IN PA (Include a separate schedule if additional space is needed.)

Did you own or rent property in PA titled to the corporation or any Single Member LLC during this filing period? If yes, the below section must be completed.

0 = 0 wn

R = Rent

Street Address

City

County

KOZ/KOEZ



| 7070055435 | l | ۵ | L | | П | 2 | 2 | 4 | 3 | 5 |
|------------|---|---|---|--|---|---|---|---|---|---|
|------------|---|---|---|--|---|---|---|---|---|---|

REVENUE ID

TAX YEAR END

75375055

NAME ARTEX INC

RCT-101 07-22 PAGE 4 OF 4 PA CORPORATE NET INCOME TAX REPORT 2022

SECTION G: CORPORATE OFFICER (Must sign affirmation below.)

CORPORATE OFFICERS

(See instructions.)

SSN

Last Name

First Name

MI

Must provide requested information for all filled officer positions.

President/Managing Partner

5786

OLDAKOMZKI

ADAM

Vice President

Secretary

Treasurer/Tax Manager

NAME

PHONE EMAIL 9738092687

I affirm under penalties prescribed by law, this report, including any accompanying schedules and statements, has been examined by me and to the best of my knowledge and belief is a true, correct and complete report. If this report is an amended report, the taxpayer hereby consents to the extension of the assessment period for this tax year to one year from the date of filing of this amended report or three years from the filing of the original report, whichever period last expires, and agrees to retain all required records pertaining to that tax and tax period until the end of the extended assessment period, regardless of any statutory provision providing for a shorter period of retention. For purposes of this extension, an original report filed before the due date is deemed filed on the due date.

I am authorized to execute this consent to the extension of the assessment period.

Corporate Officer Signature

Date

PREPARER'S INFORMATION

Firm Federal EIN

853118011

Firm Name

DK TAX SERVICES INC

Preparer's Name

Damian Kolnierowicz

Preparer's SSN/PTIN

P02271992

Address Line 1

358 MIDLAND AVE

Address Line 2

City

Garfield

State ZIP ΝJ

Province

Country Code

07026

Country Code

0146

Foreign Postal Code

FORM BARCODE

I affirm under penalties prescribed by law, this report, including any accompanying schedules and statements, has been prepared by me and to the best of my knowledge and belief is a true, correct and complete report.

Tax Preparer's Signature

Date

Clan



| PA SCHEDU | LE | A |
|-----------------|----|---|
| Interest Income | | |

5509P70059

PA-20S/PA-65 A (DR) 05-22 (I) PA Department of Revenue

2022

OFFICIAL USE ONLY Name as shown on PA-20S/PA-65 Information Return FEIN ARTEX INC 223818576 Interest income from federal Schedule K Less business or rental interest income (working capital) - report on PA-20S/PA-65 Schedule M, Part I 2 Adjusted federal interest income - subtract Line 2 from Line 1 0 3 Federal-exempt interest income taxable for PA PIT - itemize below 4 Other interest income not included on Line 3 and Line 4 5 Gross PA interest income - add Lines 3 through 5 6 PA-exempt interest income included on Line 6 - itemize below 7 PA-taxable interest income - subtract Line 7 from Line 6. Enter the result on the PA-20S/PA-65 Information Return, Page 1, Section III, Line 3. 8 Federal-exempt interest income - list sources and amounts PA-exempt interest income - list sources and amounts

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PA SCHEDULE B

2208710026

Dividend Income and Capital Gain Distributions

PA-20S/PA-65 B (DR) 05-22 (I) PA Department of Revenue

2022

OFFICIAL USE ONLY Name as shown on PA-20S/PA-65 Information Return FEIN ARTEX INC 223818576 Ordinary dividend income from federal Schedule K Less business or rental dividend income (working capital) - report on PA-20S/PA-65 Schedule M, Part I 0 2 Adjusted federal dividend income - subtract Line 2 from Line 1 3 Federal-exempt dividend income taxable for PA PIT - itemize below 4 Other dividend income not included on Line 3 and Line 4 5 Capital gain distributions income 6 0 Gross PA-taxable dividend income - add Lines 3 through 6 7 PA-exempt dividend income included on Line 7 – itemize below 8 0 PA-taxable dividend income and capital gain distributions income – subtract Line 8 from Line 7. Enter the result on the PA-20S/PA-65 Information Return, Page 1, Section III, Line 4. 9 0 Federal-exempt dividend income - list sources and amounts PA-exempt dividend income - list sources and amounts

PARTNER/MEMBER/ SHAREHOLDER DIRECTORY - 2022 PA-20S/PA-65 Directory (05-22)

ARTEX INC

223818576

The entity must list its partners/members/shareholders on this schedule. CODE - Enter the type of owner code: RI=Resident Individual, NR=Nonresident Individual, PI=Part-year Resident Individual (S Corp Only), P=Partnership, C=C Corp, E=Estate, T=Trust, S=S Corp, L=LLC taxed as a Partnership, LC=LLC taxed as a C Corp, LS=LLC taxed as a S Corp, DE=Disregarded Entity, B=Bank/Financial Institution, I=Insurance Company, X=Exempt SSN/FEIN; Revenue ID; Ownership %- (enter each owner's percentage); and Name and Address.

ŀ Code NR SSN/FEIN 579P Revenue ID Ownership % 700 Name & Address: ADAM OPDVKOMZKI105 HAYWARD PL APT 2 Wallington NJ 07057 2 Code SSN/FEIN Revenue ID Ownership % Name & Address: 3 Code SSN/FEIN Revenue ID Ownership % Name & Address: 4 Code SSN/FEIN Revenue ID Ownership % Name & Address: 5 Code SSN/FEIN Revenue ID Ownership % Name & Address: Ь Code SSN/FEIN Revenue ID Ownership % Name & Address:



PA SCHEDULE M - 2022
Reconciliation of Federal-Taxable Income (Loss)
to PA-Taxable Income (Loss)
PA-20S/PA-65 M (06-22)
PA Department of Revenue

223818576

PA Schedule M, Part I. Classifying Federal Income (Loss) for PA Personal Income Tax Purposes

Classify, without adjustment, the federal income (loss) from Schedule K of federal Form 1120S or from Schedule K of federal Form 1065. The entity must allocate or apportion the amounts from the federal categories to the reportable PA PIT classes. The total of the specific federal line items should equal the total of the federal schedule.

| Federal Form | | Classified for Pennsylvania Personal Income Tax purposes | | | | | | |
|--------------|---|--|-------------------------------|---|---|--|--|--|
| K 10 | orm 1120S, Schedule line description Form 065, Schedule K line escription | (a) Federal Income (loss) | (b) PA Business Income (loss) | (c) Interest Income PA Schedule A | (d) Dividend Income PA Schedule B | (e) Gain (loss) From Sales PA Schedule D | (f) Rent & Royalty Income (loss) PA Schedule E | |
| 1 | Ordinary income (loss) from trade or business activities | 1778 | 1778 | | | | | |
| 2 | Net income (loss) from rental real estate activities | 0 | | | | | | |
| 3 | Other net rental income (loss) | ٥ | | | | | | |
| 4 | Interest income | 0 | | | | | | |
| 5 | Dividends | 0 | | | | | | |
| 6 | Royalty income | 0 | | | | | | |
| 7 | Net short-term capital gain (loss) | 0 | | | | | | |
| 8 | Net long-term capital gain (loss) | ם | | | | | | |
| 9 | Net gain (loss) from disposal of IRC Section 179 property | 0 | | | | | | |
| 10 | Net IRC Section 1231 gain (loss) from Form 4797 | 0 | | | | | | |
| 11 | Other income (loss) | 0 | • | | | | | |
| 12 | Total Federal income (loss) by Pennsylvania classification. Total the amounts in each column. | 1778 | 1778 | 0 | 0 | 0 | 0 | |



PA SCHEDULE M - 2022
Reconciliation of Federal-Taxable Income (Loss)
to PA-Taxable Income (Loss)
PA-20S/PA-65 M (06–22)
PA Department of Revenue

223818576

PA Schedule M, Part II. Determining PA Reportable Income (Loss) by Classification The entity may need to prepare a PA Schedule M, Part II, if it must make adjustments to properly determine its reportable classified income (loss) for its PA-20S/PA-65 Information Return. This specific list of adjustments applies to income (loss) Total Rental Income (Loss) PA Allocated from a business or farm and rental/royalty income (loss). or Total Business Income Income (Loss) Enter whole dollars only. (Loss) Before Apportionment Section I. Federal Classified Income (Loss). Income class from Part I, Column: ŀ 5 Enter the initial of Column (b) or (f) only. Section II. Itemize income adjustments that increase PA reportable income (reduce the loss). Deferred income relating to advance payments for goods and services ŀ 2 Difference in qualified gain (loss) for each business sale of property 3 4 C Gain from business like-kind exchanges, see PA PIT Guide for instructions 5 RESERVED FOR FUTURE USE Income from cancellation of debt that PA treats differently from federal rules 9 10 Increases in income in the year of change resulting from spread in the year of change associated with IRC 1.1. 12 Section 481(a) adjustment Income from obligations of other states and organizations that is not exempt for PA purposes 73 14 Other income adjustments that increase PA-reportable income. Submit statement 15 16 17 \Box 79 Section III. Itemize income adjustments that decrease the PA reportable income (increase the loss). Difference in qualified gain (loss) for each business sale of property ŀ 2 Income from obligations of the U.S. government and other organizations that is not taxable for PA purposes 3 4 Decreases for previously reported income in prior year resulting from spread associated with IRC Section 481(a) $\,$ 5 Ь d Other income adjustments that decrease PA-reportable income. Submit statement 7 8 III. Total 9 0 10 Section IV. Adjusted PA Reportable Income. See PA-20S/PA-65 Schedule M instructions. Ţ, 2 Section V. Itemize those expenses that PA law does not allow that the entity deducted on its federal form. These adjustments increase PA reportable income (reduce the loss). Taxes paid on income. Submit REV-1190 L 2 Differences in depreciation/amortization taken for PA and federal purposes 3 4 Key man life insurance premiums (owners as beneficiaries) 5 Ь Differences in PA treatment of guaranteed payments for capital 7 8 Differences in depreciation for bonus depreciation (PA law does not allow bonus depreciation.) 9 70 Expense adjustments to qualify for the PA credits claimed in Section V of the PA-20S/PA-65 LL 75 Other expenses the entity deducted on its federal return that PA does not allow. Submit statement 1.3 14 V. Total 15 76 0 Section VI. Itemize those expenses that PA law allows that the entity could not deduct on its federal form. These adjustments decrease PA reportable income (increase the loss). Business meals and entertainment expenses that the entity could not deduct ŀ 2 Sales tax on depreciable assets Ε 4 Differences in depreciation/amortization taken for PA and federal purposes ¢ 5 Ь d IRC Section 179 expenses (the maximum for PA purposes is \$25,000) 7 8 Expenses for employees, including PAS corporation shareholder-employees e 9 70 Life insurance premiums (PAS corporation or partnership as beneficiary) f TT75 Expense adjustments to qualify for federal credits 13 14 Current expensing of Intangible Drilling costs - Schedule I, Line 5 h 15 16 Other expenses PA allows that the entity did not deduct on the federal return. Submit statement 17 18 VI. Total 19 50 Section VII. Total Taxable Income (Loss). Add Section IV, plus V, minus VI. ŀ 2 П

Page 2 of 2



PA Schedule NRK-1 (05-22)

2022 Nonresident Schedule
of Shareholder/Partner/Beneficiary Pass Through Income, Loss and Credits

15796 OLDAKOMZKI ADAM Final Ν 105 HAYWARD PL APT 2 (Individual=1, PA S Corp=2, All Other Corp=3, Owner J. Estate/Trust=4, Partnership=5, LLC=6, Exempt=7) Shareholder's Stock Ownership % Amended Wallington ΝJ 07057 Beneficiary's year-end Distribution % ARTEX INC Partner's % of: Profit sharing % Wallington NJ 07057 223818576 Loss sharing % Fiscal Year 070755 Capital (Estate/Trust=E, Partnership=P, PA S Corp =S, LLC=L) Ownership % Short Year 753755 General Partner or N Limited Partner or Υ LLC Member-Manager Other LLC Member NOTE: Amounts from this schedule must be reported on the appropriate PA Tax Return. PA-Taxable Business Income (Loss) from Operations ŀ Net Gain (Loss) from the Sale, Exchange or Disposition of Property 5 3 Net Income (Loss) from Rents, Royalties, Patents and Copyrights Ε 0 Income of/from Estates or Trusts Gambling and Lottery Winnings (Loss) 5 PA Nonresident Tax Withheld Total Other Credits. Submit statement. 7 Distributions of Cash, Marketable Securities, and Property - not including guaranteed payments 8 8 Guaranteed Payments for Capital or Other Services 9 All Other Guaranteed Payments for Services Rendered (PA-Apportioned Amount Only) 70 11 Guaranteed Payments to the Retired Partner 11 12 Distributions from PA Accumulated Adjustments Account Ν 75 Liquidating 13 Distributions of Cash, Marketable Securities, and Property 13 14 Nontaxable income (loss) or nondeductible expenses required to calculate owner's economic 14 investment. Submit statement. Note: Lines 15 through 18 are for information purposes only. 15 Owner's Share of IRC Section 179 allowed according to PA rules 15 16 Owner's Share of Straight-Line Depreciation ΓP 17 Partner's Share of Nonrecourse Liabilities at year-end 17 18 Partner's Share of Recourse Liabilities at year-end 38



Profit and Loss

January - November, 2023

| | TOTAL |
|---|----------------|
| Income | |
| Construction Income | 1,031,563.80 |
| Unapplied Cash Payment Income | 0.00 |
| Total Income | \$1,031,563.80 |
| Cost of Goods Sold | |
| Construction Materials Costs | 123,570.52 |
| Subcontractors Expense | 188,229.00 |
| Supply & Material | 815.16 |
| Tools and Small Equipment | 42,241.48 |
| Total Cost of Goods Sold | \$354,856.16 |
| GROSS PROFIT | \$676,707.64 |
| Expenses | |
| Advertising and Promotion | 4,904.76 |
| Auto and Truck Expenses | |
| Fuel | 18,466.15 |
| Garage and Parking | 5,618.38 |
| Registration | 682.75 |
| Repairs and Service | 17,873.79 |
| Tolls | 7,082.00 |
| Total Auto and Truck Expenses | 49,723.07 |
| Bank Service Charges | 775.25 |
| Bookkeeper | 4,855.00 |
| Business Licenses and Permits | 203.25 |
| Charitable Contributions | 373.94 |
| Consulting Fee | 150,541.00 |
| Dues and Subscriptions | 1,268.27 |
| Insurance Expense | |
| Auto Insurance | 11,160.85 |
| Business Insurance | 21,142.09 |
| Commercial Umbrella | 1,087.46 |
| Medical Insurance | 8,977.00 |
| Worker's Compensation Insurance | 1,664.00 |
| Total Insurance Expense | 44,031.40 |
| Interest Expense | 1,720.10 |
| Credit Cards Interest Expense | 12,827.14 |
| JP Mortgan Chase (Chevrolet) | 560.96 |
| Kabbage Loan Interest Expense | 646.00 |
| SBA Loan Interest Expense | 27,456.00 |
| Spencer Line of Credit Interest Expense | 20,272.08 |
| Wells Fargo LOC | 2,390.94 |
| Total Interest Expense | 65,873.22 |

Profit and Loss

January - November, 2023

| | TOTAL |
|-------------------------------------|----------------|
| Internet and Website Expense | 706.75 |
| Meals and Entertainment | 6,025.06 |
| Office Supplies | 5,069.13 |
| Payroll Expenses | |
| LABOR | 252,931.01 |
| OFFICE | 29,700.00 |
| OFFICE A.O. | 62,000.00 |
| OFFICE J.S. | 48,167.02 |
| Total Payroll Expenses | 392,798.03 |
| Payroll Taxes | 43,950.58 |
| Postage and Shipping | 257.88 |
| Professional Fees | 16,924.00 |
| Rent Expense | 78,100.00 |
| Repairs and Maintenance | 188.85 |
| Software and Internet | 565.28 |
| Telephone Expense | 7,704.86 |
| Training & Education | 2,430.00 |
| Travel | 760.58 |
| Unapplied Cash Bill Payment Expense | 0.00 |
| Uniforms | 1,728.20 |
| Utilities | 8,745.79 |
| Total Expenses | \$888,504.15 |
| NET OPERATING INCOME | \$ -211,796.51 |
| Other Income | |
| Interest income | 0.03 |
| Other Income - Rewards | 250.00 |
| Total Other Income | \$250.03 |
| NET OTHER INCOME | \$250.03 |
| NET INCOME | \$ -211,546.48 |